



KEVIN KAMENETZ
County Executive

LAWRENCE M. STAHL
Managing Administrative Law Judge
JOHN E. BEVERUNGEN
Administrative Law Judge

November 7, 2012

Howard L. Alderman, Jr., Esquire
Levin & Gann, P.A.
Nottingham Centre, 8th Floor
502 Washington Avenue
Towson, MD 21204

Re: **MOTION FOR RECONSIDERATION**
Petition for Administrative Variance
Case No. 2013-0002-A
Property: 1005 Rolandvue Road

Dear Mr. Alderman:

Enclosed please find the Motion for Reconsideration Opinion and Order rendered in the above-captioned case.

In the event the decision rendered is unfavorable to any party, please be advised that any party may file with the Department of Permits, Approvals and Inspections an appeal within thirty (30) days from the date of this Order. For further information on filing an appeal, please contact the Office of Administrative Hearings at 410-887-3868.

Sincerely,

A handwritten signature in black ink, appearing to read "JEB", followed by a horizontal line.

JOHN E. BEVERUNGEN
Administrative Law Judge
for Baltimore County

JEB:dlw
Enclosure

c: Francis X. Borgerding, Jr., Esq., 409 Washington Ave., Suite 600, Towson, MD 21204
Henry A. and Pamela B. Knott, 1005 Rolandvue Road, Towson, MD 21204
Mr. and Mrs. Joseph K. Fox, 923 Rolandvue Road, Towson, MD 21204
Nick Griffin, 1001 Rolandvue Road, Towson, MD 21204
Edward and Shaun Latchford, 925 Rolandvue Road, Towson, MD 21204
Peggy Squitieri, RRLRAIA, P.O. Box 204, Riderwood, MD 21139

IN RE: PETITION FOR ADMIN. VARIANCE *
(1005 Rolandvue Road)
9th Election District *
2nd Councilmanic District *
Henry A. and Pamela B. Knott *
Petitioners *

BEFORE THE
OFFICE OF ADMINISTRATIVE
HEARINGS FOR
BALTIMORE COUNTY
CASE NO. 2013-0002-A

* * * * *

MOTION FOR RECONSIDERATION
ORDER AND OPINION

Now pending is Petitioners' motion for reconsideration, as well as an opposition thereto filed by Protestants and a reply memorandum in further support of the motion. I have reviewed all of the papers, and will grant, in part, the motion for reconsideration.

In the Order dated September 13, 2012, I denied variance relief primarily because I believed the Petitioners had an alternative location in which to construct the garage that would not require variance relief. In a series of letters exchanged after the hearing (attached as Exhibits R1-3 to the motion for reconsideration), Baltimore County zoning authorities indicated they would not approve locating the garage along Rolandvue Road. The County believed that the property was "unique," but that constructing a garage in front of the recorded street setback line would be a "dangerous precedent." Exhibit R-3.

This interpretation, coupled with the September 13, 2012 Order, leaves the Petitioners with few options for locating the garage. Maryland cases have indicated the "determinative factor" in granting variance relief is whether a hardship will be created. Chesley v. City of Annapolis, 176 Md. App. 413, 428 (2007). Being deprived of a right commonly enjoyed by others is one way to establish such a hardship, and I believe the Petitioners' have been so denied.

ORDER RECEIVED FOR FILING

Date 11-7-12

By EW

The Petitioners' seek to construct an accessory structure (detached garage), which is obviously a modest request and a right enjoyed by many owners of single-family dwellings. But the Order in this case, coupled with the County's letter of October 3, 2012, would leave the Petitioners with few options for locating the structure, especially considering the steeper slopes existing to the west of the dwelling. As such, given the uniqueness of the property and the hardship the Petitioners would experience if the regulations were strictly enforced, I will grant the motion for reconsideration to the extent that variance relief will be granted so that Petitioners can construct the garage in the front yard of their dwelling.

At the same time, I am not unmindful of the concerns identified by the neighbors who testified at the hearing. In cases of this nature, it is difficult (if not impossible) to arrive at a solution that will please everyone. Even so, in an effort to minimize the impacts upon the community, I will require a 15' setback from the property line abutting the shared-use driveway. In addition, I will require the Petitioners to submit to the Department of Planning (DOP) for approval (prior to permit issuance) building elevations, to ensure that the appearance and materials used will be appropriate for this location.

THEREFORE, IT IS ORDERED, this 7th day of November, 2012 by the Administrative Law Judge for Baltimore County, that Petitioners' Motion for Reconsideration, be and is GRANTED (in part) to the extent that variance relief will be granted to permit a detached accessory structure (garage) to be located in the front and side yards of the dwelling.

The relief granted herein is expressly subject to and conditioned upon the following:

1. The accessory structure must be setback a minimum of 15' from the property boundary line abutting the shared use driveway shown on the site plan (Petitioners' Exhibit 3);

ORDER RECEIVED FOR FILING

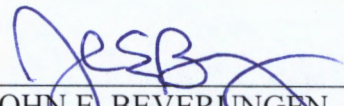
Date 11-7-12

By aj

2. Approval by the DOP (prior to permit issuance) of building elevations for the accessory garage; and
3. The Petitioners may apply for any required permits and may be granted same upon receipt of this Order; however the Petitioners are hereby made aware that proceeding at this time is at his own risk until such time as the thirty (30) day appellate process from this Order has expired. If for whatever reason, this Order is reversed, the Petitioners will be required to return and be responsible for returning said property to its original condition.

Any appeal of this decision must be made within thirty (30) days of the date of this Order.

JEB:dlw



JOHN E. BEVERUNGEN
Administrative Law Judge for
Baltimore County

ORDER RECEIVED FOR FILING

Date 11-7-12

By DLW



KEVIN KAMENETZ
County Executive

LAWRENCE M. STAHL
Managing Administrative Law Judge
JOHN E. BEVERUNGEN
TIMOTHY M. KOTROCO
Administrative Law Judges

September 13, 2012

Howard L. Alderman, Jr., Esquire
Levin & Gann, P.A.
Nottingham Centre, 8th Floor
502 Washington Avenue
Towson, MD 21204

Re: Petition for Administrative Variance
Case No. 2013-0002-A
Property: 1005 Rolandvue Road

Dear Mr. Alderman:

Enclosed please find the decision rendered in the above-captioned case.

In the event the decision rendered is unfavorable to any party, please be advised that any party may file with the Department of Permits, Approvals and Inspections an appeal within thirty (30) days from the date of this Order. For further information on filing an appeal, please contact the Office of Administrative Hearings at 410-887-3868.

Sincerely,

A handwritten signature in black ink, appearing to read "JEB", is written over the typed name of John E. Beverungen.

JOHN E. BEVERUNGEN
Administrative Law Judge
for Baltimore County

JEB:dlw
Enclosure

c: Henry A. and Pamela B. Knott, 1005 Rolandvue Road, Towson, Maryland 21204
Mr. and Mrs. Joseph K. Fox, 923 Rolandvue Road, Towson, MD 21204
Nick Griffin, 1001 Rolandvue Road, Towson, MD 21204
Edward and Shaun Latchford, 925 Rolandvue Road, Towson, MD 21204
Peggy Squitieri, RRLRAIA, P.O. Box 204, Riderwood, MD 21139

IN RE: PETITION FOR ADMIN. VARIANCE *

(1005 Rolandvue Road)

Henry A. and Pamela B. Knott

Petitioners

*

*

*

*

BEFORE THE

OFFICE OF ADMINISTRATIVE

HEARINGS FOR

BALTIMORE COUNTY

CASE NO. 2013-0002-A

* * * * *

ORDER AND OPINION

This matter comes before the Office of Administrative Hearings (OAH) as a Petition for Administrative Variance filed by the legal owners of the property, Henry A. and Pamela B. Knott. The Petitioners are requesting Variance relief from § 400.1 of the Baltimore County Zoning Regulations ("B.C.Z.R."), to permit a proposed detached accessory structure (garage) to be located in the front and side yard of the principal building¹. The subject property and requested relief is more fully depicted on the site plan that was marked and accepted into evidence as Petitioners' Exhibit 3.

This matter was originally filed as an Administrative Variance, with a closing date of August 6, 2012. On August 2, 2012, Joseph K. Fox (923 Rolandvue Road) requested a formal hearing on this matter. The hearing was subsequently scheduled for Friday, September 7, 2012 at 11:00 AM in Room 205 of the Jefferson Building, 105 West Chesapeake Avenue, Towson.

The Zoning Advisory Committee (ZAC) comments were received and are made part of the record of this case. There were no adverse comments submitted from any of the County reviewing agencies.

¹ The Petition originally sought relief under B.C.Z.R. § 400.3 for a 20' accessory structure. This request was withdrawn at the hearing by Petitioners' counsel.

ORDER RECEIVED FOR FILING

Date 9-13-12

By aw

Appearing at the public hearing in support for this case was Henry and Pamela Knott, Theresa Amos, and Mitchell J. Kellman with Daft McCune Walker, Inc. Howard L. Alderman, Jr., Esquire with Levin & Gann, P.A., appeared and represented the Petitioners. Also in attendance were Mr. and Mrs. Joseph K. Fox, Nick Griffin, Edward and Shaun Latchford, and Peggy Squitieri.

Testimony and evidence revealed that the subject property is 27,442 square feet and is zoned DR 1. Mr. and Mrs. Knott purchased the property in 2004, and indicated they always planned for adding a two-car garage. Mr. Knott testified that the proposed front yard location was the "only practical spot" to locate the garage.

The Petitioners presented testimony from Mitchell Kellman, who was accepted as an expert in the B.C.Z.R. and zoning issues generally. Mr. Kellman testified the property was of a very irregular shape, and had a topographical change on both the east and west sides of the lot. Mr. Kellman opined that it would be a hardship and difficult (but not impossible) for Petitioners to locate the garage on the east side of their lot (which is on the left side as one enters the driveway) facing Rolandvue Drive, because the topographical grade change would require excavation and the use of retaining walls.

Several neighbors attended the hearing and opposed the variance. While each witness mentioned various issues, the common theme was that the proposed garage was not appropriate for the front yard and would be an aesthetically unpleasing structure (Mr. Griffin described the proposed building as a "pop up, prefab, do-it-yourself structure out of a catalog") that would diminish the value of nearby homes, many of which are valued in excess of \$1M. The witnesses explained also that with rare exception, the garages in the Ruxton area are either attached to the dwelling or located in the rear yard.

ORDER RECEIVED FOR FILING

Date 9-13-12

By DW

Based upon the testimony and evidence presented, I will deny the request for variance relief. While the property may be unique (given its shape and topographical changes), I do not believe that uniqueness causes the zoning regulation (here, B.C.Z.R. § 400.1) to impact disproportionately the Petitioners' property. While there is a grade change in that area of the property east of the blacktop driveway, it is not so severe a change as to preclude the construction of the garage in that vicinity. In photographs submitted by the Protestants, it would certainly appear as if a garage could be situated in this area. See Protestants Exhibits 2 and 3. In addition, the private drive by which these homes are accessed is tree lined and bucolic in appearance (See Protestants Exhibit 6), and the construction of a garage just 4' from that drive would "affect the aesthetic ambience of ... the properties which lie in the immediate area." Daihl v. Balto. County, 258 Md. 157, 167 (1970).

As such, I do not believe the grant of variance relief would be in "strict harmony with the spirit and intent" of the regulations. B.C.Z.R. § 307.1. I think this is especially the case here, where the Petitioners have another alternative available to locate the garage that would not require variance relief. Montgomery Co. v. Rotwein, 169 Md. App. 716 (2006). Though I regret that I am unable to grant the Petitioners' petition, I would at the same time note that the Ruxton neighborhood is so attractive and desirable because (in part at least) the community is so diligent in ensuring the zoning laws are enforced. The Petitioners own a beautiful home in a picturesque setting, and zoning and development proposals are often met with skepticism and resistance in such a setting.

Pursuant to the advertisement, posting of the property, and public hearing on this petition, and after considering the testimony and evidence, I find that Petitioners' variance request should be denied.

ORDER RECEIVED FOR FILING

Date 9-13-12

By pw

THEREFORE, IT IS ORDERED, this 13th day of September, 2012 by the Administrative Law Judge for Baltimore County, that the Petition for Variance relief from § 400.1 of the Baltimore County Zoning Regulations ("B.C.Z.R."), to permit a proposed detached accessory structure (garage) to be located on the front and side yard of the principal building, be and is hereby DENIED.

Any appeal of this decision must be made within thirty (30) days of the date of this Order.

JEB:dlw



JOHN E. BEVERUNGEN
Administrative Law Judge for
Baltimore County

ORDER RECEIVED FOR FILING

Date 9-13-12

By DLW



ADMINISTRATIVE ZONING PETITION

FOR ADMINISTRATIVE VARIANCE - OR - ADMINISTRATIVE SPECIAL HEARING

To be filed with the Department of Permits, Approvals and Inspections

To the Office of Administrative Law of Baltimore County for the property located at:

Address 1005 ROLANDVUE RD 21204 which is presently zoned DR-1

Deed Reference 20983/00619 10 Digit Tax Account # 0904003496

Property Owner(s) Printed Name(s) HENRY A KNOTT PAMELA B KNOTT

(SELECT THE HEARING(S) BY MARKING **X** AT THE APPROPRIATE SELECTION(S) AND ADDING THE PETITION REQUEST)

Administrative Variances require that the Affidavit on the reverse of this Petition Form be completed / notarized.

The undersigned legal owner(s) of the property situate in Baltimore County and which is described in the description and plat attached hereto and made a part hereof, hereby petition for a

1. ☒ **ADMINISTRATIVE VARIANCE** from section(s)

Sections 400.1 and 400.3 - to permit a proposed detached accessory structure (garage) to be located on the front and side yard of the principal building and have a height of 20 feet in lieu of the required rear and maximum allowed 15.

of the zoning regulations of Baltimore County, to the zoning law of Baltimore County.

2. ☐ **ADMINISTRATIVE SPECIAL HEARING** to approve a waiver pursuant to Sections 32-4-107(b), 32-4-223.(8), and Section 32-4-416(a)(2): (indicate type of work in this space to raze, alter or construct addition to building)

of the zoning regulations of Baltimore County, to the zoning law of Baltimore County.

Property is to be posted and advertised as prescribed by the zoning regulations.

I, or we, agree to pay expenses of above petition(s), advertising, posting, etc. and further agree to and are to be bounded by the zoning regulations and restrictions of Baltimore County adopted pursuant to the zoning law for Baltimore County.

Legal Owner(s) Affirmation: I / we do so solemnly declare and affirm, under the penalties of perjury, that I / We are the legal owner(s) of the property which is the subject of this / these Petition(s).

Contract Purchaser/Lessee:

Name- Type or Print

Signature

Mailing Address City State

Zip Code Telephone # Email Address

Attorney for Petitioner:

Name- Type or Print

Signature

Mailing Address City State

Zip Code Telephone # Email Address

Legal Owners:

HENRY A KNOTT / PAMELA B KNOTT

Name #1 - Type or Print Name #2 - Type or Print

Signature #1 Signature #2

1005 ROLANDVUE RD, TOWSON MD

21204 / 410 561 7003 / CHIPKNOTT@GMAIL

Representative to be contacted:

HENRY A KNOTT

Name - Type or Print

Signature

1005 ROLANDVUE RD TOWSON MD

21204 / 410 561 7003 / chipknott@gmail.com

A PUBLIC HEARING having formally demanded and/or found to be required, it is ordered by the Office of Administrative Law, of Baltimore County, this 7 day of September, 2012 that the subject matter of this petition be set for a public hearing, advertised, as required by the zoning regulations of Baltimore County and that the property be reposted.

Administrative Law Judge of Baltimore County

CASE NUMBER 2013-0002-A Filing Date 7/9/12 Estimated Posting Date 7/22/12 Reviewer RJ

Affidavit in Support of Administrative Variance

(THIS AFFIDAVIT IS NOT REQUIRED FOR AN HISTORIC ADMINISTRATIVE SPECIAL HEARING)

The undersigned hereby affirms under the penalties of perjury to the Administrative Law Judge of Baltimore County, the following: That the information herein given is within the personal knowledge of the Affiant(s) and that the Affiant(s) is/are competent to testify thereto in the event that a public hearing is scheduled in the future with regard thereto.

That the property is not under an active zoning violation citation and Affiant(s) is/are the resident home owner(s) of this residential lot, or is/are the contract purchaser(s) of this residential lot, who will, upon purchase, reside at the existing dwelling on said property located at:

Address: 1005 ROLANDVUE Rd, TOWSON MD 21204
Print or Type Address of property City State Zip Code

Based upon personal knowledge, the following are the facts which I/we base the request for an Administrative Variance at the above address. (Clearly state practical difficulty or hardship here)

The first variance is relief from the rear yard setback due to the triangular shaped lot does not have a "traditional" rear yard. We are asking that the proposed 2 car garage be constructed in the side yard. The placement of the structure will be near but not attached creating a minimum hardship during inclement weather. The lot topography does not reasonably allow a garage to be built in any other location because of the severe grade of a 42' drop (15.1%) over the approximately 278 feet and the triangular shape of the lot. Homes immediately adjacent or across from this property have garages (5 out of 6). There is no exterior storage structure on the property. The existing Real Estate market makes garages with additional storage imperative for resale.

The second variance is due to height restriction of 15 feet. The house has minimum storage capacity. The property owner does improvements and handyman work. Currently his tools and equipment occupy rooms and areas considered "living spaces" not storage rooms. We are asking for the height restriction to be raised to 20 feet. This would allow storage above the vehicles and a normal roof pitch to be attractive and in keeping with other garages in the area.

(If additional space for the petition request or the above statement is needed, label and attach it to this Form)

[Signature]
Signature of Affiant

HENRY A KNOTT
Name- Print or Type

[Signature]
Signature of Affiant

Pamela B. Knott
Name- Print or Type

The following information is to be completed by a Notary Public of the State of Maryland

STATE OF MARYLAND, COUNTY OF BALTIMORE, to wit:

I HEREBY CERTIFY, this 5th day of July, 2012, before me a Notary of Maryland, in and for the County aforesaid, personally appeared

Henry A Knott + Pamela B Knott

the Affiant(s) herein, personally known or satisfactorily identified to me as such Affiant(s) (Print name(s) here)

AS WITNESS my hand and Notaries Seal

[Signature]
Notary Public

My Commission Expires

JASON WANGOWICZ
NOTARY PUBLIC
BALTIMORE COUNTY, MARYLAND
MY COMMISSION EXPIRES 04/15/2013

To whom it may concern:

The owners of 1005 Rolandvue Rd. Towson, MD are asking for 2 variances.

The first variance is relief from the rear yard setback due to the triangular shaped lot does not have a "traditional" rear yard. We are asking that the proposed 2 car garage be constructed in the side yard. The placement of the structure will be near but not attached creating a minimum hardship during inclement weather. The lot topography does not reasonably allow a garage to be built in any other location because of the severe grade of a 42' drop (15.1%) over the approximately 278 feet and the triangular shape of the lot. Homes immediately adjacent or across from this property have garages (5 out of 6). There is no exterior storage structure on the property. The existing Real Estate market makes garages with additional storage imperative for resale.

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Item #0002

ZONING DESCRIPTION FOR 1105 ROLANDVUE ROAD

Beginning at a point on the south side of Rolandvue Road, which is 50 feet wide, at the distance of 1380 feet (+/-) west of Malvern Avenue, which is 50 feet wide. Being Lot #6, in the subdivision of "Rolandvue" as recorded in Baltimore County Plat Book #32, Folio #89, containing 27,442 square feet, 0.62998 acre. Located in the 9th Election District and 2nd Councilmanic District

Item #0002

BALTIMORE COUNTY, MARYLAND
OFFICE OF BUDGET AND FINANCE
MISCELLANEOUS CASH RECEIPT

No. **85556**

Date: **7/9/12**

PAID RECEIPT

BUSINESS ACTUAL TIME DR#
 7/09/2012 7/09/2012 11:33:39 5
 REF: 0003 WALKTH REOS LRD
 >> RECEIPT # 596782 7/09/2012 OFLH
 Dept: 5 529 ZONING VERIFICATION
 CR NO. 06555

Fund	Dept	Unit	Sub Unit	Rev Source/	Sub Rev/	Obj	Sub Obj	Dept Obj	BS Acct	Amount
001	806	0000		6150						\$75.00

Recpt Tot \$75.00
 \$75.00 CK \$1.00 CA
 Baltimore County, Maryland

Total: **\$75.00**

Rec From:

For:

zoning hearing - case # 2013-0002-A

DISTRIBUTION

WHITE - CASHIER PINK - AGENCY YELLOW - CUSTOMER GOLD - ACCOUNTING
 PLEASE PRESS HARD!!!!

**CASHIER'S
 VALIDATION**



FORMAL DEMAND FOR HEARING

CASE NUMBER: 2013 - 00024

Address: 1005 ROLANDVUE RD.

Petitioner(s): HENRY A. KNOTT II / AMELIA B. KNOTT

TO THE ZONING COMMISSIONER OF BALTIMORE COUNTY:

I/We JOSEPH K. FOX
Name - Type or Print

☒ Legal Owner ANDOR ☒ Resident of
923 ROLANDVUE RD.
Address

TOWSON MD 21204
City State Zip Code

410-337-5460 / 202-360-0819
Telephone Number

which is located approximately 15 feet from the
property, which is the subject of the above petition, **do hereby**
formally demand that a public hearing be set in this matter.
ATTACHED IS THE REQUIRED PROCESSING FEE FOR THIS
DEMAND.

J. K. Fox 8/2/12
Signature Date

Signature Date
Revised 9/18/98 - wcr/scj

BALTIMORE COUNTY, MARYLAND
OFFICE OF BUDGET AND FINANCE
MISCELLANEOUS CASH RECEIPT

No. 87192

Date: 8-3-12

PAID RECEIPT

BUSINESS ACTUAL TIME DRW
8/03/2012 8/03/2012 14:23:14 5

RECEIPT # 804411 8/03/2012 OFLN

Ind	Dept	Unit	Sub Unit	Obj	Sub Obj	Dept Obj	BS Acct	Amount
	806	0000		6150				\$60.00

Total: \$60.00

REC
FROM:

JOSEPH K. FOX

FOR:

FORMAL DEMAND FOR HEARING
2013-0007A

5 528 ZONING VERIFICATION

DR 08/03/2012

Receipt Tot \$40.00

4.00 TX \$40.00 CA

Baltimore County, Maryland

CASHIER'S
VALIDATION

CONTRIBUTION

TE - CASHIER

PINK - AGENCY

YELLOW - CUSTOMER

GOLD - ACCOUNTING

PLEASE PRESS HARD!!!!

DEPARTMENT OF PERMITS, APPROVALS AND INSPECTIONS

ZONING REVIEW

ADVERTISING REQUIREMENTS AND PROCEDURES FOR ZONING HEARINGS

The Baltimore County Zoning Regulations (BCZR) require that notice be given to the general public/neighboring property owners relative to property which is the subject of an upcoming zoning hearing. For those petitions which require a public hearing, this notice is accomplished by posting a sign on the property (responsibility of the petitioner) and placement of a notice in a newspaper of general circulation in the County, both at least fifteen (15) days before the hearing.

Zoning Review will ensure that the legal requirements for advertising are satisfied. However, the petitioner is responsible for the costs associated with these requirements. The newspaper will bill the person listed below for the advertising. This advertising is due upon receipt and should be remitted directly to the newspaper.

OPINIONS MAY NOT BE ISSUED UNTIL ALL ADVERTISING COSTS ARE PAID.

For Newspaper Advertising:

Item Number or Case Number: 2013-0002-A
Petitioner: HENRY A KNOTT PAMELA B KNOTT
Address or Location: 1005 ROLANDVUE Rd, Towson MD 21204

PLEASE FORWARD ADVERTISING BILL TO:

Name: HENRY A KNOTT
Address: 1005 ROLANDVUE Rd
TOWSON, MD 21204

Telephone Number: 410 561 7003

ADMINISTRATIVE VARIANCE INFORMATION SHEET AND DATES

Case Number ²⁰¹³2012- 0002 -A Address 1005 Rolandvue Rd

Contact Person: David Duval Phone Number: 410-887-3391
Planner, Please Print Your Name

Filing Date: 7/9/12 Posting Date: 7/22/12 Closing Date: 8/06/12

Any contact made with this office regarding the status of the administrative variance should be through the contact person (planner) using the case number.

1. **POSTING/COST:** The petitioner must use one of the sign posters on the approved list (on the reverse side of this form) and the petitioner is responsible for all printing/posting costs. Any reposting must be done only by one of the sign posters on the approved list and the petitioner is again responsible for all associated costs. The zoning notice sign must be visible on the property on or before the posting date noted above. It should remain there through the closing date.
2. **DEADLINE:** The closing date is the deadline for an occupant or owner within 1,000 feet to file a formal request for a public hearing. Please understand that even if there is no formal request for a public hearing, the process is not complete on the closing date.
3. **ORDER:** After the closing date, the file will be reviewed by the zoning or deputy zoning commissioner. He may: (a) grant the requested relief; (b) deny the requested relief; or (c) order that the matter be set in for a public hearing. You will receive written notification, usually within 10 days of the closing date if all County agencies' comments are received, as to whether the petition has been granted, denied, or will go to public hearing. The order will be mailed to you by First Class mail.
4. **POSSIBLE PUBLIC HEARING AND REPOSTING:** In cases that must go to a public hearing (whether due to a neighbor's formal request or by order of the zoning or deputy zoning commissioner), notification will be forwarded to you. The sign on the property must be changed giving notice of the hearing date, time and location. As when the sign was originally posted, certification of this change and a photograph of the altered sign must be forwarded to this office.

(Detach Along Dotted Line)

Petitioner: This Part of the Form is for the Sign Poster Only

USE THE ADMINISTRATIVE VARIANCE SIGN FORMAT

Case Number ²⁰¹³2012- 0002 -A Address 1005 Rolandvue Rd

Petitioner's Name Henry A. Knott Telephone 410 561 7003

Posting Date: 7/22/12 Closing Date: 8/06/12

Wording for Sign: To Permit a proposed detached accessory structure
(garage) to be located on the front and side of the
principal building and have a height of 20 feet in lieu of the
required rear and maximum allowed 15

Revised 7/06/11

NOTICE OF ZONING HEARING

The Administrative Law Judges of Baltimore County, by authority of the Zoning Act and Regulations of Baltimore County will hold a public hearing in Towson, Maryland on the property identified herein as follows:

Case: # 2013-0002-A

1005 Rolandvue Road

S/s of Rolandvue Road, 1380 ft. w/of centerline of Malvern Avenue

9th Election District - 2nd Councilmanic District

Legal Owner(s): Henry & Pamela Knott

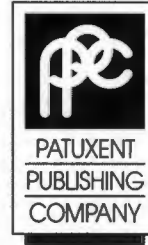
Variance: to permit a proposed detached accessory structure (garage) to be located on the front and side yard of the principal building and have a height of 20 feet in lieu of the required rear and maximum allowed 15.

Hearing: Friday, September 7, 2012 at 11:00 a.m. in Room 205 Jefferson Building, 105 West Chesapeake Avenue, Towson 21204.

ARNOLD JABLON, DIRECTOR OF PERMITS, APPROVALS AND INSPECTIONS FOR BALTIMORE COUNTY

NOTES: (1) Hearings are Handicapped Accessible; for special accommodations Please Contact the Administrative Hearings Office at (410) 887-3868.

(2) For information concerning the File and/or Hearing, Contact the Zoning Review Office at (410) 887-3391.
8/253 Aug. 16 869424



501 N. Calvert Street, Baltimore, MD 21278

August 16, 2012

THIS IS TO CERTIFY, that the annexed advertisement was published in the following newspaper published in Baltimore County, Maryland, ONE TIME, said publication appearing on August 16, 2012.

- ☒ The Jeffersonian
- ☐ Arbutus Times
- ☐ Catonsville Times
- ☐ Towson Times
- ☐ Owings Mills Times
- ☐ NE Booster/Reporter
- ☐ North County News

PATUXENT PUBLISHING COMPANY

By: Susan Wilkinson

Susan Wilkinson

CERTIFICATE OF POSTING

ATTENTION: KRISTEN LEWIS

DATE: 08/12/2012

Case Number: 2013-0002-A

Petitioner / Developer: HENRY A. KNOTT

Date of Hearing (Closing): SEPTEMBER 7, 2012

This is to certify under the penalties of perjury that the necessary sign(s) required by law were posted conspicuously on the property located at:
1005 ROLANDVUE ROAD

The sign(s) were posted on: AUGUST 17, 2012



Linda O'Keefe
(Signature of Sign Poster)

Linda O'Keefe
(Printed Name of Sign Poster)

523 Penny Lane
(Street Address of Sign Poster)

Hunt Valley, Maryland 21030
(City, State, Zip of Sign Poster)

410 - 666 - 5366
(Telephone Number of Sign Poster)



KEVIN KAMENETZ
County Executive

ARNOLD JABLON
Deputy Administrative Officer
Director, Department of Permits,
Approvals & Inspections

August 7, 2012

NOTICE OF ZONING HEARING

The Administrative Law Judges of Baltimore County, by authority of the Zoning Act and Regulations of Baltimore County, will hold a public hearing in Towson, Maryland on the property identified herein as follows:

CASE NUMBER: 2013-0002-A

1005 Rolandvue Road

S/s of Rolandvue Road, 1380 ft. w/of centerline of Malvern Avenue

9th Election District – 2nd Councilmanic District

Legal Owners: Henry & Pamela Knott

Variance to permit a proposed detached accessory structure (garage) to be located on the front and side yard of the principal building and have a height of 20 feet in lieu of the required rear and maximum allowed 15.

Hearing: Friday, September 7, 2012 at 11:00 a.m. in Room 205, Jefferson Building,
105 West Chesapeake Avenue, Towson 21204

A handwritten signature in dark ink, appearing to read "Arnold Jablon", is written over the printed name and title.

Arnold Jablon
Director

AJ:kl

C: Mr. & Mrs. Henry Knott, 1005 Rolandvue Road, Towson 21204
Mr. Joseph Fox, 923 Rolanduve Road, Towson 21204

- NOTES: (1) **THE PETITIONER MUST HAVE THE ZONING NOTICE SIGN POSTED BY AN APPROVED POSTER ON THE PROPERTY BY SATURDAY, AUGUST 18, 2012.**
- (2) HEARINGS ARE HANDICAPPED ACCESSIBLE; FOR SPECIAL ACCOMMODATIONS PLEASE CALL THE ADMINISTRATIVE HEARINGS OFFICE AT 410-887-3868.
- (3) FOR INFORMATION CONCERNING THE FILE AND/OR HEARING, CONTACT THE ZONING REVIEW OFFICE AT 410-887-3391.

TO: PATUXENT PUBLISHING COMPANY
Thursday, August 16, 2012 Issue - Jeffersonian

Please forward billing to:

Henry Knott
1005 Rolandvue Road
Towson, MD 21204

410-561-7003

NOTICE OF ZONING HEARING

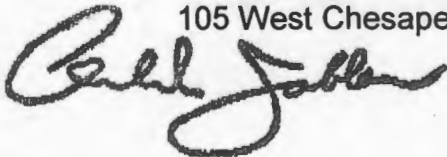
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Arnold Jablon
Director of Permits, Approvals and Inspections for Baltimore County

- NOTES: (1) HEARINGS ARE HANDICAPPED ACCESSIBLE; FOR SPECIAL ACCOMODATIONS, PLEASE CONTACT THE ADMINISTRATIVE HEARINGS OFFICE AT 410-887-3868.
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KEVIN KAMENETZ
County Executive

ARNOLD JABLON
Deputy Administrative Officer
Director, Department of Permits,
Approvals & Inspections

August 8, 2012

Henry & Pamela Knott
1005 Rolandvue Road
Towson, MD 21204

Dear Mr. & Mrs. Knott:

RE: Demand for Public Hearing, Administrative Variance, Case Number: 2013-0002-A

The purpose of this letter is to officially notify you that your administrative posting procedure has been superceded by a timely public hearing demand concerning the above proposed administrative procedure.

The hearing has been scheduled, and the notice of public hearing indicating the date, time and location of the hearing is attached. This notice will also contain the date that the sign must be reposted with the hearing information.

The property must be reposted with the hearing date, time and location. This notification will be published in the Jeffersonian and you will be billed directly by Patuxent Publishing for this.

If you need any further explanation or additional information, please feel free to contact Kristen Lewis at 410-887-3391.

Very truly yours,

A handwritten signature in black ink, reading "W. Carl Richards, Jr.".

W. Carl Richards, Jr.
Supervisor
Zoning Review

WCR:kl

C: Joseph Fox, 923 Rolandvue Road, Towson 21204

CERTIFICATE OF POSTING

ATTENTION: KRISTEN LEWIS

DATE: 07/23/2012

Case Number: 2013-0002-A

Petitioner / Developer: HENRY A. KNOTT

Date of Hearing (Closing): AUGUST 6, 2012

This is to certify under the penalties of perjury that the necessary sign(s) required by law were posted conspicuously on the property located at:
1005 ROLANDVUE ROAD

The sign(s) were posted on: JULY 21, 2012



Linda O'Keefe
(Signature of Sign Poster)

Linda O'Keefe
(Printed Name of Sign Poster)

523 Penny Lane
(Street Address of Sign Poster)

Hunt Valley, Maryland 21030
(City, State, Zip of Sign Poster)

410 - 666 - 5366
(Telephone Number of Sign Poster)

M E M O R A N D U M

DATE: December 12, 2012
TO: Zoning Review Office
FROM: Office of Administrative Hearings
RE: Case No. 2013-0002-A - Appeal Period Expired

The appeal period for the above-referenced case expired on December 10, 2012. There being no appeal filed, the subject file is ready for return to the Zoning Review Office and is placed in the 'pick up box.'

c: ☒ Case File
Office of Administrative Hearings

JB 9-7-12 (h)

HOWARD L. ALDERMAN, JR.
halderman@LevinGann.com

DIRECT DIAL
410-321-4640

LAW OFFICES
LEVIN & GANN
A PROFESSIONAL ASSOCIATION
NOTTINGHAM CENTRE
502 WASHINGTON AVENUE
8th Floor
TOWSON, MARYLAND 21204
410-321-0600
TELEFAX 410-296-2801

ELLIS LEVIN (1893-1960)
CALMAN A. LEVIN (1930-2003)

October 17, 2012

VIA EMAIL ATTACHMENT AND 1ST CLASS MAIL

The Honorable John E. Beverungen,
Administrative Law Judge
Baltimore County Office of Administrative Hearings
105 W. Chesapeake Avenue, Suite 103
Towson, Maryland 21204

RECEIVED

OCT 19 2012

OFFICE OF ADMINISTRATIVE HEARINGS

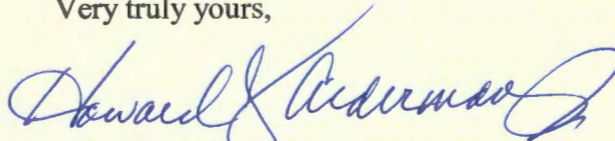
RE: 1005 Rolandvue Road
Henry A. and Patricia B. Knott, Petitioners
Case No. 2013-0002-A
Reply to Response to Motion for Reconsideration

Dear Judge Beverungen:

Enclosed, please accept for filing the enclosed Reply to Protestants' Response to Motion for Reconsideration in the above-referenced case. This Reply is filed within thirty (30) days of your Order, issued September 13, 2012 and on the same day that the Protestants' Response was received by the undersigned.

Should you need any additional information in this regard, please do not hesitate to contact me.

Very truly yours,



Howard L. Alderman, Jr.

HLA/gk
Enclosure

c (w/encl.):	Mr. and Mrs. Henry A. Knott	[via 1 st Class Mail & Email]
	Francis X. Borgerding, Jr., Esquire	[via 1 st Class Mail & Email]
	People's Counsel for Baltimore County	[via 1 st Class Mail & Email]

**IN RE: PETITION FOR
ADMINISTRATIVE VARIANCE
(1005 Rolandvue Road)**

Henry A. and Pamela B. Knott,

Petitioners/Owners

**BEFORE THE
OFFICE OF ADMINISTRATIVE
HEARINGS FOR
BALTIMORE COUNTY**

Case No.: 2013-0002-A

**PETITIONERS' REPLY TO PROTESTANTS' MOTION FOR
RECONSIDERATION AND TO ALTER/AMEND ORDER**

Henry A. Knott and Pamela B. Knott (collectively the “**Owners**” or “**Petitioners**”) by and through the undersigned legal counsel, in accordance with the *Code of Baltimore County Regulations*, Title 2, Chapter 1, Rule 4K., hereby reply to the paper filed and captioned as *Protestants' Response to Motion for Reconsideration and to Alter/Amend Order* (“**Protestants' Response**”) and state as follows:

1. Protestants attempt to support the erroneous determination by the ALJ for Baltimore County (“ALJ”) that the Petitioners’ property is not a “double frontage lot” by alleging that the subject property “fronts on one public street and a private access road.” [Protestants’ Response at 6.]

2. In referencing Exhibit R-4 attached to Petitioners’ Motion for Reconsideration and the illustrations of double frontage lots shown thereon, Protestants’ assert that said illustration shows lots that “are bounded by two streets not a street and private access drive.”

[Protestants' Response at 7.]

3. Protestants, apparently, believe that because the subject property owned by the Petitioners binds on, as its southern border, a right of way that has not been dedicated to the public, said right of way is not a 'street' for purposes of zoning and that it is but a mere 'private access drive'.

4. Protestants apparently concede and acknowledge that Rolandvue Avenue is a 'street' for purposes of zoning determination of whether a lot is a double-frontage lot or not.

5. The *Baltimore County Zoning Regulations* [BCZR] define the term "Street" as a "motorway which is not a freeway or expressway but which **has a right-of-way more than 20 feet in width.**" BCZR § 101 [Emphasis added.]

6. In rendering decisions, the ALJ is entitled to take judicial notice of items of public record.

7. Protestants' first witness at the hearing before the ALJ, Mr. Joseph Fox, gave his home address as 923 Rolandvue Avenue.

8. Obtained from the publicly recorded Land Records of Baltimore County and attached hereto and incorporated herein as Exhibit RP-1, is a deed for 923 Rolandvue Avenue, dated January 12, 2007 and recorded at Liber 25103, folio 508, from Marcio M. and Anne H. Mendex to Joseph K. Fox (Protestants' first witness) and ToniAnn E. Fox ("Fox Deed"); the ALJ is requested to take judicial notice thereof.

9. The Fox Deed, in the fourth paragraph, states that the 923 Rolandvue Avenue

property being conveyed to Mr. and Mrs. Fox is “SUBJECT TO AND TOGETHER WITH the right to use in common with others entitled of the **25 foot right-of way** a [sic] shown on the aforesaid revised plat,” [Emphasis added.]

10. The ‘private access road’ described by Protestants is, as shown immediately above, a “25 foot right of way” and, applying the definitions of the BCZR is, therefore, a street.

11. The Petitioners’ property has frontage on Rolandvue Avenue as its northern boundary and frontage on the 25 foot right of way as its southern boundary; both are a ‘street’ as defined in the BCZR.

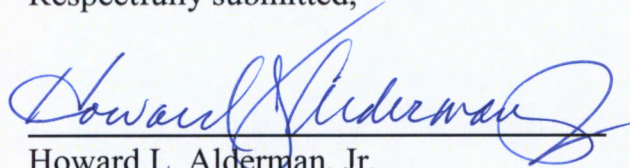
12. The plain interpretation of the BCZR is that the subject property owned by the Petitioners is a double-frontage lot, and any interpretation to the contrary cannot withstand challenge.

FOR ALL OF THE FOREGOING REASONS, the Owners respectfully request that the ALJ:

- A. Reconsider the Order issued September 13, 2012; and
- B. Revise, alter and amend the Order, by finding that: (i) the subject property is a ‘double-frontage’ lot; (ii) all existing and proposed structures, including without limitation accessory structures, located behind the existing dwelling on the subject property must meet the principal building setback imposed by the BCZR and the Plat; (iii) the relief requested by Petitioners is, as testified

to by their expert, the minimum relief necessary to construct an accessory garage on the subject property; (iv) the subject property, based on its shape and topographical changes, is unique [Order at 3]; (v) absent a grant of the relief requested, the subject property is impacted in a disproportionate manner due to the shape, topography and double-frontage configuration; (vi) the minimum relief requested is in strict harmony with the spirit and intent of the BCZR given the myriad of constraints imposed on the subject property; and GRANT the amended relief requested, together with such further relief as the nature of this case may require.

Respectfully submitted,

A handwritten signature in blue ink, reading "Howard L. Alderman, Jr.", with a stylized flourish at the end.

Howard L. Alderman, Jr.

Levin & Gann, P.A.

8th Floor, Nottingham Centre

502 Washington Avenue

Towson, Maryland 21204

410.321.0600 [voice]

410.296.2801 [fax]

halderman@LevinGann.com [e-mail]

Attorneys for Petitioners/Owners

CERTIFICATE OF SERVICE

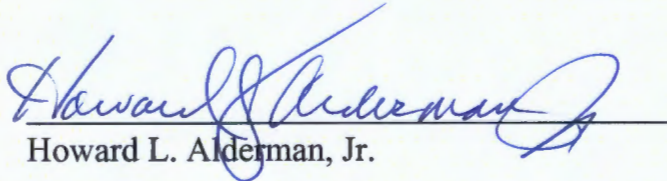
I HEREBY CERTIFY that on this 17th day of October, a copy of the foregoing Petitioners' Reply to Protestants' Response to Motion for Reconsideration and to Alter/Amend Order and the exhibit attached thereto were mailed via First-Class, United States Mail to the following:

Peter Max Zimmerman, People's Counsel for Baltimore County
Carole S. Demilio, Deputy People's Counsel for Baltimore County
Jefferson Building, Suite 204
105 West Chesapeake Avenue
Towson, Maryland 21204

and to

Francis X. Borgerding, Jr., Esquire
409 Washington Avenue, Suite 600
Towson, Maryland 21204

AND FURTHER, sent as email attachments to: Peter Zimmerman at (peoplescounsel@baltimorecountymd.gov); and Frank Borgerding at (Borgerdinglaw@aol.com)


Howard L. Alderman, Jr.

0025103 5081

113

This Deed, MADE THIS 12th day of January, in the year 2007 by and between Marcio M. Menendez and Anne H. Menendez, parties of the first part, and Joseph K. Fox and ToniAnn E. Fox, parties of the second part.

Witnesseth, That in consideration of the sum of Nine Hundred Seventy Five Thousand Dollars and NO Cents (\$975,000.00), the receipt of which is hereby acknowledged, the said parties of the first part do grant and convey to the said parties of the second part, in fee simple, that parcel of ground situate in Baltimore County, Maryland and described as follows, that is to say:

BEGINNING FOR THE SAME and being known and designated as Lot No. 7 s shown on the Revised Plat, Section 3, "Rolandvue", which Plat is recorded among the Land Records in Plat Book OTG No. 34, folio 58.

SUBJECT TO AND TOGETHER WITH the right to use in common with others entitled of the 25 foot right-of-way a shown on the aforesaid revised plat, Section 3, "Rolandvue", and as more particularly described in the Confirmatory Deed from Richard C. Davis, et al., to Walter E. Boggs and wife, dated July 29, 1970 and recorded among the Land Records aforesaid in Liber OTG No. 5113, folio 253 as a means of ingress and egress.

TOGETHER WITH the right to the use in common with others entitled thereto of the parcel of land between Rolandvue Road as now existing and the proposed right-of-way line thereof as shown on the aforesaid plat.

The improvements thereon being known as No. 923 Rolandvue Avenue.

Parcel ID No. 09-1600002841

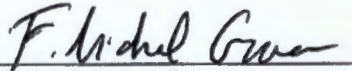
BEING the same parcel of ground which by deed dated September 12, 1975 and recorded among the Land Records of Baltimore County, Maryland in Liber EHK No. 5566, folio 564 was granted and conveyed by Thomas E. Cox and Virginia A. Cox unto Marcio M. Menendez and Anne H. Menendez, the Grantors herein.

THE WITHIN GRANTEE(S) DO HEREBY CERTIFY UNDER THE PENALTY(IES) OF PERJURY THAT THE LAND CONVEYED HEREIN IS RESIDENTIALLY IMPROVED OWNER-OCCUPIED REAL PROPERTY AND THAT THE RESIDENCE WILL BE OCCUPIED BY US AT LEAST 7 OUT OF 12 MONTHS IMMEDIATELY AFTER THE PROPERTY IS CONVEYED AS EVIDENCED BY THE SIGNATURE(S) BELOW.

PETITIONER'S
REPLY
EXHIBIT
RP-1

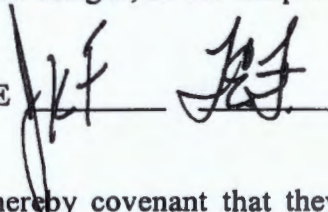
0025103 5091

This is to certify the within instrument was prepared under the supervision of an Attorney duly admitted to practice before the Court of Appeals of the State of Maryland.


F. Michael Grace, Esquire

TOGETHER with the buildings thereupon, and the rights, alleys, ways, waters, privileges, appurtenances and advantages thereto belonging, or in anywise appertaining.

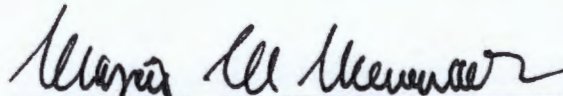
TO HAVE AND TO HOLD the said described lot of ground and premises to the said parties of the second part as tenants by the entireties, their assigns, the survivor of them and the survivor's personal representatives, heirs and assigns, in fee simple.

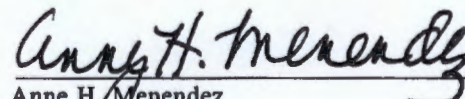
BUYERS INITIAL HERE 

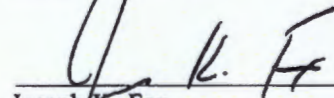
And the said parties of the first part hereby covenant that they have not done or suffered to be done any act, matter or thing whatsoever, to encumber the property hereby conveyed; that they will warrant specially the property hereby granted; and that they will execute such further assurances of the same as may be requisite.

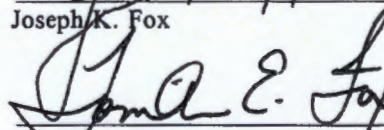
WITNESS the hands and seals of said Grantor(s) and Grantee(s).

Test:


Marcio M. Menendez (SEAL)


Anne H. Menendez (SEAL)


Joseph K. Fox (SEAL)


ToniAnn E. Fox (SEAL)

State of Maryland, ^{City} County of Baltimore, to wit:

I Hereby Certify, That on this 12 day of January, in the year 2007, before me, the subscriber, a Notary Public of the State of MD, County of Baltimore personally appeared Marcio M. Menendez and Anne H. Menendez known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within instrument, and acknowledged the foregoing Deed to be their act, and in my presence signed and sealed the same.

IN WITNESS WHEREOF, I hereunto set my hand and official seal

My Commission Expires: 8/1, 2009



State Of Maryland, ^{City} County Of Baltimore, to wit:

I Hereby Certify, That on this 12 day of January, in the year 2007, before me, the subscriber, a Notary Public of the State of MD, County of Baltimore personally appeared Joseph K. Fox and ToniAnn E. Fox known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within instrument, and acknowledged the foregoing Deed to be their act, and in my presence signed and sealed the same.

IN WITNESS WHEREOF, I hereunto set my hand and official seal

My Commission Expires: 8/1, 2009



AFTER RECORDING, RETURN TO:

Joseph K. Fox and ToniAnn E. Fox
923 Rolandvue Avenue
Ruxton, MD 21204
File Number: 1739RPK

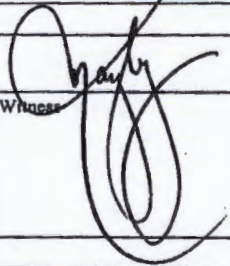
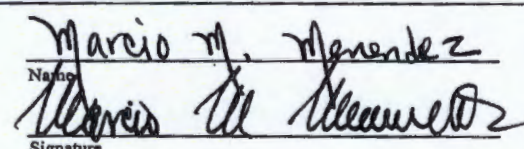
A-1

**Certification of Exemption from Withholding Upon Disposition of Maryland Real Estate
Affidavit of Residence or Principal Residence**

Based on the certification below, Transferor claims exemption from the tax withholding requirements of §10-912 of the Tax-General Article, Annotated Code of Maryland. Section 10-912 provides that certain tax payments must be withheld and paid when a deed or other instrument that effects a change in ownership of real property is presented for recordation. The requirements of §10-912 do not apply when a transferor provides a certification of Maryland residence or certification that the transferred property is the transferor's principal residence.

1. Transferor Information	
Name of Transferor	Marcio M. Menendez
2. Reasons for Exemption	
Resident Status	☒ I, Transferor, am a resident of the State of Maryland. ☐ Transferor is a resident entity under § 10-912(A)(4) of the Tax-General Article of the Annotated Code of Maryland, I am an agent of Transferor, and I have authority to sign this document on Transferor's behalf.
Principal Residence	☐ Although I am no longer a resident of the State of Maryland, the Property is my principal residence as defined in IRC §121.

Under penalty of perjury, I certify that I have examined this declaration and that, to the best of my knowledge, it is true, correct, and complete.

3a. Individual Transferors	
Witness 	Name Marcio M. Menendez Signature 
3b. Entity Transferors	
Witness/Attest 	Name of Entity By Name Title

A-1

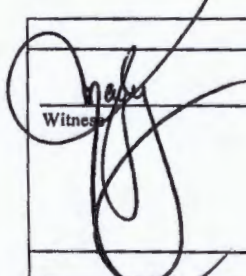
Certification of Exemption from Withholding Upon Disposition of Maryland Real Estate Affidavit of Residence or Principal Residence

Based on the certification below, Transferor claims exemption from the tax withholding requirements of §10-912 of the Tax-General Article, Annotated Code of Maryland. Section 10-912 provides that certain tax payments must be withheld and paid when a deed or other instrument that effects a change in ownership of real property is presented for recordation. The requirements of §10-912 do not apply when a transferor provides a certification of Maryland residence or certification that the transferred property is the transferor's principal residence.

1. Transferor Information	
Name of Transferor	Anne H. Menendez

2. Reasons for Exemption	
Resident Status	☒ I, Transferor, am a resident of the State of Maryland. ☐ Transferor is a resident entity under § 10-912(A)(4) of the Tax-General Article of the Annotated Code of Maryland, I am an agent of Transferor, and I have authority to sign this document on Transferor's behalf.
Principal Residence	☐ Although I am no longer a resident of the State of Maryland, the Property is my principal residence as defined in IRC §121.

Under penalty of perjury, I certify that I have examined this declaration and that, to the best of my knowledge, it is true, correct, and complete.

3a. Individual Transferors	
 Witness	Anne H. Menendez Name Anne H. Menendez Signature
3b. Entity Transferors	
Witness/Attest	Name of Entity By Name Title

00234031 5001

State of Maryland Land Instrument Intake Sheet

Baltimore City County: Baltimore County

Information provided is for the use of the Clerk's Office, State Department of Assessments and Taxation, and County Finance Office only.

(Type or Print in Black Ink Only - All Copies Must Be Legible)

1 Type(s) of Instruments		() Check Box if Addendum Intake Form is Attached.				IMP ED SURE \$ 20.00	
2 Conveyance Type Check Box		☒ Deed ☐ Mortgage ☐ Lease ☐ 3 Other ☐ 2nd DQT ☐ Other				RECORDING FEE 20.00	
3 Tax Exemptions (if applicable)		☒ Improved Sale ☐ Unimproved Sale ☐ Multiple Account ☐ Not an Arms-Length Sale[9]				TR TAX STATE 4,875.00	
4 Cite or Explain Authority		Recordation State Transfer County Transfer owner occ.				TOTAL 4,915.00	
5 Fees		Consideration Amount Purchase Price/Consideration \$ 975,000.00 Any New Mortgage \$ 502,000.00 Balance of Existing Mortgage \$ Other: \$ 375,000.00 2nd Mortgage Other: \$ Full Cash Value \$				Finance Office Use Only Transfer and Recordation Tax Consideration Transfer Tax Consideration \$ Less Exemption Amount \$ Total Transfer Tax \$ Recordation Tax Consideration \$ X() per \$500 = \$ TOTAL DUE \$	
6 Description of Property		District 09 Property Tax ID No.(1) 16-00-002841 Grantor Liber/Folio 5566/564 Map 69 Parcel No. 148 Var. LOG [1](5) Subdivision Name Rolandvue Lot (3a) 7 Block(3b) 3 Sect/AR(3d) 34/58 Plat Ref. SqFt/Acreage(4) Location/Address of Property Being Conveyed (2) 923 Rolandvue Avenue, Ruxton, MD 21204 Other Property Identifiers (if applicable) Water Meter Account No.				Agent: Tax Bill: C.B. Credit: A.G. Tax/Other:	
7 Transferred From		Residential [] or Non-Residential [] Fee Simple [] or Ground Rent [] Amount: \$ Partial Conveyance? [] Yes [X] No Description/Amt. of SqFt/Acreage Transferred: If Partial Conveyance, List Improvements Conveyed:				Doc. 1 - Grantor(s) Name(s) Marcio M. Menendez Anne H. Menendez Doc. 1 - Owner(s) of Record, if Different from Grantor(s) Doc. 2 - Grantor(s) Name(s) Joseph K. Fox ToniAnn E. Fox Doc. 2 - Owner(s) of Record, if Different from Grantor(s)	
8 Transferred To		Doc. 1 - Grantee(s) Name(s) Joseph K. Fox ToniAnn E. Fox New Owner's (Grantee) Mailing Address 923 Rolandvue Avenue, Ruxton, MD 21204 Doc. 1 - Additional Name(s) to be Indexed (Optional) Doc. 2 - Additional Name(s) to be Indexed (Optional) ABN AMRO Mortgage Group, Inc.				Doc. 1 - Grantor(s) Name(s) Doc. 2 - Grantee(s) Name(s) Joseph G. Blume, Jr.	
9 Other Names To Be Indexed		Instrument Submitted By or Contact Person Name: Tristan Sills FILE: 1739RPK Firm: RGS Fountainhead Title Address: 2 Village Square Suite 254, Baltimore, MD 2121 (410) 435-4665				Return to Contact Person Hold for Pickup Return Address Provided	
10 Contact/Mail Information		IMPORTANT: BOTH THE ORIGINAL DEED AND A PHOTOCOPY MUST ACCOMPANY EACH TRANSFER Assessment Information X Yes No Will the property being conveyed be the grantee's principal residence? Yes X No Does transfer include personal property? If yes, identify: Yes X No Was property surveyed? If yes, attach copy of survey (if recorded, no copy required)				Return to Contact Person Hold for Pickup Return Address Provided	
11		Assessment Use Only - Do Not Write Below This Line Agricultural Verification [] Whole [] Part [] Transfer Process Verification [] Date Received: 1/19/2007 Assigned Property No.: Sub: Block: Plat: Lot: Section: Parcel: Ex. Cd: Ex. Cd:				Return to Contact Person Hold for Pickup Return Address Provided	

BALTIMORE COUNTY CIRCUIT COURT (Land Records) SM 25-103, p. 0513 NSA CE62-24958 Date available 02/09/2007 Printed 10/17/2012

DUPLICATE PAID RECEIPT
 White - Clerk's Office
 Canary - SSDAT
 Pink - Office of Finance
 Goldenrod - Preparer
 AOC-CC-300 (8/95)

Addendum
State of Maryland Land Instrument Intake Sheet
☐ Baltimore City ☒ County: Baltimore County

The addendum form should be used when one transaction involves more than two instruments.
 Each instrument should be itemized in accordance with Section No. 1 of the Intake Sheet.

(Type or Print in Black Ink Only - All Copies Must Be Legible)

FILE: 1739RPK

5 (Continued)	Amount of Fees		Doc. 3	Doc. 4	Doc. 5	Doc. 6
	Recording Charge	\$	20.00	\$	\$	\$
	Fees Surcharge	\$	20.00	\$	\$	\$
	State Recording Tax	\$		\$	\$	\$
	State Transfer Tax	\$		\$	\$	\$
	County Transfer Tax	\$		\$	\$	\$
	Other	\$		\$	\$	\$
	Other	\$		\$	\$	\$
7 (Continued) Transferred From	Doc. 3 - Grantor(s) Name(s)			Doc. 4 - Grantor(s) Name(s)		
	Joseph F. Fox					
	Toniann E. Fox					
	Doc. 5 - Grantor(s) Name(s)			Doc. 6 - Grantor(s) Name(s)		
8 (Continued) Transferred To	Doc. 3 - Owner(s) of Record, if Different from Grantor(s)			Doc. 4 - Owner(s) of Record, if Different from Grantor(s)		
	Doc. 5 - Owner(s) of Record, if Different from Grantor(s)			Doc. 6 - Owner(s) of Record, if Different from Grantor(s)		
9 (Continued) Other Names To Be Indexed	Doc. 3 - Grantee(s) Name(s)			Doc. 4 - Grantee(s) Name(s)		
	Jack Adams					
	Doc. 5 - Grantee(s) Name(s)			Doc. 6 - Grantee(s) Name(s)		
Special Instructions	Doc. 3 - Additional Name(s) to be Indexed (Optional)			Doc. 4 - Additional Name(s) to be Indexed (Optional)		
	JPMorgan Chase Bank, N.A.					
	Doc. 5 - Additional Name(s) to be Indexed (Optional)			Doc. 6 - Additional Name(s) to be Indexed (Optional)		
Special Recording Instructions (if any)						

16-66-662841

RECORDATION TAX NOT REQUIRED
 Director of Budget and Finance
 BALTIMORE COUNTY, MARYLAND
 T.P. ART 12-108

DOC # 2 4 5 6
 Initial: 8/19/07
 DATE

Distribution: White - Clerk's Office
 Canary - SSDAT
 Pink - Office of Finance
 Goldenrod - Preparer
 AOC-CC-300 (6/95)

John Beverungen - 1005 Rolandvue Avenue - Case No. 2013-002-A

From: Howard Alderman <halderman@levingann.com>
To: "jbeverungen@baltimorecountymd.gov" <jbeverungen@baltimorecountymd.gov>
Date: 10/17/12 2:56 PM
Subject: 1005 Rolandvue Avenue - Case No. 2013-002-A
CC: "Chip Knott (chipknott@gmail.com)" <chipknott@gmail.com>, 'chip knott' <...
Attachments: Petitioners Reply to Protestants Response.pdf

Dear Judge Beverungen:

I received today a copy of the Protestants' Response to Petitioners Motion for Reconsideration. Attached hereto is a copy of a transmittal letter and Petitioners' Reply to Protestants' Response. The original is being mailed to your office with copies to Counsel of record.

Should you or your office need additional information please do not hesitate to contact me.

Howard L. Alderman, Jr.
 Attorney for Shelley Middletown Road Holdings, LLC, et al

I HEREBY CERTIFY that on this 17th day of October, 2012, a copy of this email message and attachment thereto was transmitted electronically [as shown above] to Peter Max Zimmerman, Esquire [People's Counsel for Baltimore County] and to Francis X. Borgerding, Jr., Esquire, at the email address previously provided to the undersigned or that email address listed with the Maryland State Bar Association.

Howard L. Alderman, Jr.
 Attorneys for Petitioners

~~~~~  
 Howard L. Alderman, Jr., Esquire  
 Levin & Gann, PA  
 Nottingham Centre, 8<sup>th</sup> Floor  
 502 Washington Avenue  
 Towson, Maryland 21204  
 410-321-0600 (voice)  
 410-296-2801 (fax)  
 410-456-8501 (cell)  
 Email: [halderman@LevinGann.com](mailto:halderman@LevinGann.com)  
 Website: [www.LevinGann.com](http://www.LevinGann.com)



Provide Feedback at <http://tinyurl.com/HLA-AVVO>

Find me on Completely E-Legal





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Of Maryland's**



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Circular 230 Disclosure: Pursuant to recently-enacted U.S. Treasury Department Regulations, we are now required to advise you that, unless otherwise expressly indicated, any federal tax advice contained in this communication, including attachments and enclosures, is not intended or written to be used, and may not be used, for the purpose of either (i) avoiding tax-related penalties under the U.S. Internal Revenue Code or (ii) promoting, marketing or recommending to another party any tax-related matters addressed herein.

NOTE: If a file in Adobe/PDF format is attached to this message and you do not have the software to open it, you may download and install the software at no cost from the following:

<http://www.adobe.com/products/acrobat/readstep2.html>

HOWARD L. ALDERMAN, JR.  
halderman@LevinGann.com

DIRECT DIAL  
410-321-4640

LAW OFFICES  
**LEVIN & GANN**  
A PROFESSIONAL ASSOCIATION  
NOTTINGHAM CENTRE  
507 WASHINGTON AVENUE  
8<sup>th</sup> Floor  
TOWSON, MARYLAND 21204  
410-321-0000  
TELEFAX 410-296-2801

ELLIS LEVIN (1893-1960)  
CALMAN A. LEVIN (1930-2003)

October 17, 2012

**VIA EMAIL ATTACHMENT AND 1<sup>ST</sup> CLASS MAIL**

The Honorable John E. Beverungen,  
Administrative Law Judge  
Baltimore County Office of Administrative Hearings  
105 W. Chesapeake Avenue, Suite 103  
Towson, Maryland 21204

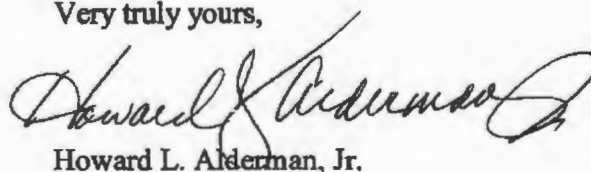
RE: 1005 Rolandvue Road  
Henry A. and Patricia B. Knott, Petitioners  
Case No. 2013-0002-A  
*Reply to Response to Motion for Reconsideration*

Dear Judge Beverungen:

Enclosed, please accept for filing the enclosed Reply to Protestants' Response to Motion for Reconsideration in the above-referenced case. This Reply is filed within thirty (30) days of your Order, issued September 13, 2012 and on the same day that the Protestants' Response was received by the undersigned.

Should you need any additional information in this regard, please do not hesitate to contact me.

Very truly yours,



Howard L. Alderman, Jr.

HLA/gk

Enclosure

c (w/encl.):

Mr. and Mrs. Henry A. Knott  
Francis X. Borgerding, Jr., Esquire  
People's Counsel for Baltimore County

[via 1<sup>st</sup> Class Mail & Email]

[via 1<sup>st</sup> Class Mail & Email]

[via 1<sup>st</sup> Class Mail & Email]



HOWARD L. ALDERMAN, JR.  
halderman@LevinGann.com

DIRECT DIAL  
410-321-4640

LAW OFFICES  
**LEVIN & GANN**  
A PROFESSIONAL ASSOCIATION  
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ELLIS LEVIN (1893-1960)  
CALMAN A. LEVIN (1930-2003)

October 17, 2012

**VIA EMAIL ATTACHMENT AND 1<sup>ST</sup> CLASS MAIL**

The Honorable John E. Beverungen,  
Administrative Law Judge  
Baltimore County Office of Administrative Hearings  
105 W. Chesapeake Avenue, Suite 103  
Towson, Maryland 21204

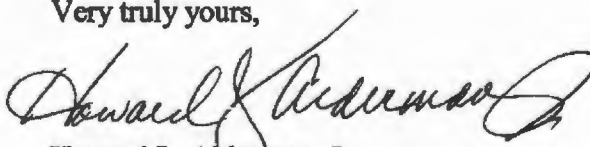
RE: 1005 Rolandvue Road  
Henry A. and Patricia B. Knott, Petitioners  
Case No. 2013-0002-A  
*Reply to Response to Motion for Reconsideration*

Dear Judge Beverungen:

Enclosed, please accept for filing the enclosed Reply to Protestants' Response to Motion for Reconsideration in the above-referenced case. This Reply is filed within thirty (30) days of your Order, issued September 13, 2012 and on the same day that the Protestants' Response was received by the undersigned.

Should you need any additional information in this regard, please do not hesitate to contact me.

Very truly yours,



Howard L. Alderman, Jr.

HLA/gk

Enclosure

c (w/encl.):

Mr. and Mrs. Henry A. Knott  
Francis X. Borgerding, Jr., Esquire  
People's Counsel for Baltimore County

[via 1<sup>st</sup> Class Mail & Email]

[via 1<sup>st</sup> Class Mail & Email]

[via 1<sup>st</sup> Class Mail & Email]

IN RE: PETITION FOR  
ADMINISTRATIVE VARIANCE  
(1005 Rolandvue Road)

*Henry A. and Pamela B. Knott,*

Petitioners/Owners

BEFORE THE  
OFFICE OF ADMINISTRATIVE  
HEARINGS FOR  
BALTIMORE COUNTY

**COPY**

Case No.: 2013-0002-A

**PETITIONERS' REPLY TO PROTESTANTS' MOTION FOR  
RECONSIDERATION AND TO ALTER/AMEND ORDER**

Henry A. Knott and Pamela B. Knott (collectively the "Owners" or "Petitioners")  
by and through the undersigned legal counsel, in accordance with the *Code of Baltimore  
County Regulations*, Title 2, Chapter 1, Rule 4K., hereby reply to the paper filed and  
captioned as *Protestants' Response to Motion for Reconsideration and to Alter/Amend Order*  
("Protestants' Response") and state as follows:

1. Protestants attempt to support the erroneous determination by the ALJ for  
Baltimore County ("ALJ") that the Petitioners' property is not a "double frontage lot" by  
alleging that the subject property "fronts on one public street and a private access road."  
[Protestants' Response at 6.]

2. In referencing Exhibit R-4 attached to Petitioners' Motion for Reconsideration  
and the illustrations of double frontage lots shown thereon, Protestants' assert that said  
illustration shows lots that "are bounded by two streets not a street and private access drive."



[Protestants' Response at 7.]

3. Protestants, apparently, believe that because the subject property owned by the Petitioners binds on, as its southern border, a right of way that has not been dedicated to the public, said right of way is not a 'street' for purposes of zoning and that it is but a mere 'private access drive'.

4. Protestants apparently concede and acknowledge that Rolandvue Avenue is a 'street' for purposes of zoning determination of whether a lot is a double-frontage lot or not.

5. The *Baltimore County Zoning Regulations* [BCZR] define the term "Street" as a "motorway which is not a freeway or expressway but which **has a right-of-way more than 20 feet in width.**" BCZR § 101 [Emphasis added.]

6. In rendering decisions, the ALJ is entitled to take judicial notice of items of public record.

7. Protestants' first witness at the hearing before the ALJ, Mr. Joseph Fox, gave his home address as 923 Rolandvue Avenue.

8. Obtained from the publicly recorded Land Records of Baltimore County and attached hereto and incorporated herein as Exhibit RP-1, is a deed for 923 Rolandvue Avenue, dated January 12, 2007 and recorded at Liber 25103, folio 508, from Marcio M. and Anne H. Mendex to Joseph K. Fox (Protestants' first witness) and ToniAnn E. Fox ("Fox Deed"); the ALJ is requested to take judicial notice thereof.

9. The Fox Deed, in the fourth paragraph, states that the 923 Rolandvue Avenue

property being conveyed to Mr. and Mrs. Fox is "SUBJECT TO AND TOGETHER WITH the right to use in common with others entitled of the **25 foot right-of way** a [*sic*] shown on the aforesaid revised plat, . . . ." [Emphasis added.]

10. The 'private access road' described by Protestants is, as shown immediately above, a "25 foot right of way" and, applying the definitions of the BCZR is, therefore, a street.

11. The Petitioners' property has frontage on Rolandvue Avenue as its northern boundary and frontage on the 25 foot right of way as its southern boundary; both are a 'street' as defined in the BCZR.

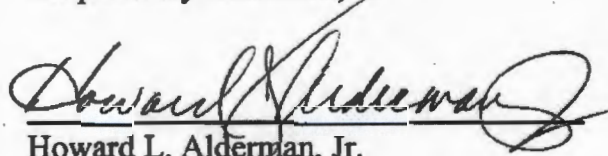
12. The plain interpretation of the BCZR is that the subject property owned by the Petitioners is a double-frontage lot, and any interpretation to the contrary cannot withstand challenge.

FOR ALL OF THE FOREGOING REASONS, the Owners respectfully request that the ALJ:

- A. Reconsider the Order issued September 13, 2012; and
- B. Revise, alter and amend the Order, by finding that: (i) the subject property is a 'double-frontage' lot; (ii) all existing and proposed structures, including without limitation accessory structures, located behind the existing dwelling on the subject property must meet the principal building setback imposed by the BCZR and the Plat; (iii) the relief requested by Petitioners is, as testified

to by their expert, the minimum relief necessary to construct an accessory garage on the subject property; (iv) the subject property, based on its shape and topographical changes, is unique [Order at 3]; (v) absent a grant of the relief requested, the subject property is impacted in a disproportionate manner due to the shape, topography and double-frontage configuration; (vi) the minimum relief requested is in strict harmony with the spirit and intent of the BCZR given the myriad of constraints imposed on the subject property; and GRANT the amended relief requested, together with such further relief as the nature of this case may require.

Respectfully submitted,



Howard L. Alderman, Jr.

Levin & Gann, P.A.

8<sup>th</sup> Floor, Nottingham Centre

502 Washington Avenue

Towson, Maryland 21204

410.321.0600 [voice]

410.296.2801 [fax]

[halderman@LevinGann.com](mailto:halderman@LevinGann.com) [e-mail]

Attorneys for Petitioners/Owners



**CERTIFICATE OF SERVICE**

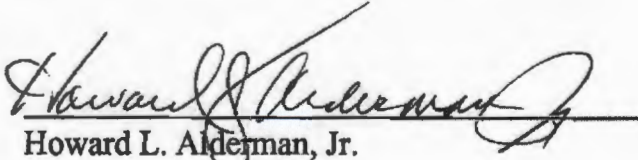
I HEREBY CERTIFY that on this 17<sup>th</sup> day of October, a copy of the foregoing Petitioners' Reply to Protestants' Response to Motion for Reconsideration and to Alter/Amend Order and the exhibit attached thereto were mailed via First-Class, United States Mail to the following:

Peter Max Zimmerman, People's Counsel for Baltimore County  
Carole S. Demilio, Deputy People's Counsel for Baltimore County  
Jefferson Building, Suite 204  
105 West Chesapeake Avenue  
Towson, Maryland 21204

and to

Francis X. Borgerding, Jr., Esquire  
409 Washington Avenue, Suite 600  
Towson, Maryland 21204

AND FURTHER, sent as email attachments to: Peter Zimmerman at ([peoplescounsel@baltimorecountymd.gov](mailto:peoplescounsel@baltimorecountymd.gov)); and Frank Borgerding at ([Borgerdinglaw@aol.com](mailto:Borgerdinglaw@aol.com))

  
Howard L. Alderman, Jr.

0025103 5081

113

**This Deed**, MADE THIS 12<sup>th</sup> day of January, in the year 2007 by and between Marcio M. Menendez and Anne H. Menendez, parties of the first part, and Joseph K. Fox and ToniAnn E. Fox, parties of the second part.

**Witnesseth**, That in consideration of the sum of Nine Hundred Seventy Five Thousand Dollars and NO Cents (\$975,000.00), the receipt of which is hereby acknowledged, the said parties of the first part do grant and convey to the said parties of the second part, in fee simple, that parcel of ground situate in Baltimore County, Maryland and described as follows, that is to say:

**BEGINNING FOR THE SAME** and being known and designated as Lot No. 7 s shown on the Revised Plat, Section 3, "Rolandvue", which Plat is recorded among the Land Records in Plat Book OTG No. 34, folio 58.

**SUBJECT TO AND TOGETHER WITH** the right to use in common with others entitled of the 25 foot right-of-way a shown on the aforesaid revised plat, Section 3, "Rolandvue", and as more particularly described in the Confirmatory Deed from Richard C. Davis, et al., to Walter E. Boggs and wife, dated July 29, 1970 and recorded among the Land Records aforesaid in Liber OTG No. 5113, folio 253 as a means of ingress and egress.

**TOGETHER WITH** the right to the use in common with others entitled thereto of the parcel of land between Rolandvue Road as now existing and the proposed right-of-way line thereof as shown on the aforesaid plat.

The improvements thereon being known as No. 923 Rolandvue Avenue.

Parcel ID No. 09-1600002841

**BEING** the same parcel of ground which by deed dated September 12, 1975 and recorded among the Land Records of Baltimore County, Maryland in Liber EHK No. 5566, folio 564 was granted and conveyed by Thomas E. Cox and Virginia A. Cox unto Marcio M. Menendez and Anne H. Menendez, the Grantors herein.

THE WITHIN GRANTEE(S) DO HEREBY CERTIFY UNDER THE PENALTY(IES) OF PERJURY THAT THE LAND CONVEYED HEREIN IS RESIDENTIALLY IMPROVED OWNER-OCCUPIED REAL PROPERTY AND THAT THE RESIDENCE WILL BE OCCUPIED BY US AT LEAST 7 OUT OF 12 MONTHS IMMEDIATELY AFTER THE PROPERTY IS CONVEYED AS EVIDENCED BY THE SIGNATURE(S) BELOW.

PETITIONER'S  
REPLY  
EXHIBIT  
RP-1



0025103 5091

*This is to certify the within instrument was prepared under the supervision of an Attorney duly admitted to practice before the Court of Appeals of the State of Maryland.*

*F. Michael Grace*  
F. Michael Grace, Esquire

**TOGETHER** with the buildings thereupon, and the rights, alleys, ways, waters, privileges, appurtenances and advantages thereto belonging, or in anywise appertaining.

**TO HAVE AND TO HOLD** the said described lot of ground and premises to the said parties of the second part as tenants by the entireties, their assigns, the survivor of them and the survivor's personal representatives, heirs and assigns, in fee simple.

BUYERS INITIAL HERE *MM* *AF*

And the said parties of the first part hereby covenant that they have not done or suffered to be done any act, matter or thing whatsoever, to encumber the property hereby conveyed; that they will warrant specially the property hereby granted; and that they will execute such further assurances of the same as may be requisite.

**WITNESS** the hands and seals of said Grantor(s) and Grantee(s).

Test:

*Marcio M. Menendez* (SEAL)  
Marcio M. Menendez

*Anne H. Menendez* (SEAL)  
Anne H. Menendez

*Joseph K. Fox* (SEAL)  
Joseph K. Fox

*ToniAnn E. Fox* (SEAL)  
ToniAnn E. Fox



0025103 5101

City  
State of Maryland, County of Baltimore, to wit:

I Hereby Certify, That on this 12 day of January, in the year 2007, before me, the subscriber, a Notary Public of the State of MD, County of Baltimore personally appeared Marcio M. Menendez and Anne H. Menendez known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within instrument, and acknowledged the foregoing Deed to be their act, and in my presence signed and sealed the same.

IN WITNESS WHEREOF, I hereunto set my hand and official seal

My Commission Expires: 8/1, 2009

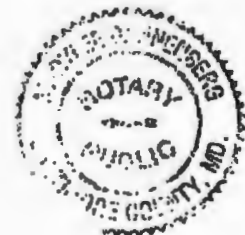


City  
State Of Maryland, County Of Baltimore, to wit:

I Hereby Certify, That on this 12 day of January, in the year 2007, before me, the subscriber, a Notary Public of the State of MD, County of Baltimore personally appeared Joseph K. Fox and ToniAnn E. Fox known to me (or satisfactorily proven) to be the persons whose names are subscribed to the within instrument, and acknowledged the foregoing Deed to be their act, and in my presence signed and sealed the same.

IN WITNESS WHEREOF, I hereunto set my hand and official seal

My Commission Expires: 8/1, 2009



AFTER RECORDING, RETURN TO:

Joseph K. Fox and ToniAnn E. Fox  
923 Rolandvue Avenue  
Ruxton, MD 21204  
File Number: 1739RPK

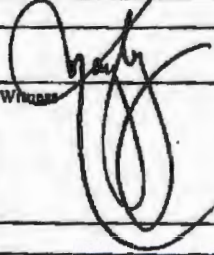
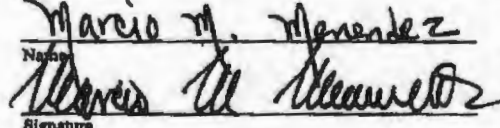
**A-1**

**Certification of Exemption from Withholding Upon Disposition of Maryland Real Estate  
Affidavit of Residence or Principal Residence**

Based on the certification below, Transferor claims exemption from the tax withholding requirements of §10-912 of the Tax-General Article, Annotated Code of Maryland. Section 10-912 provides that certain tax payments must be withheld and paid when a deed or other instrument that effects a change in ownership of real property is presented for recordation. The requirements of §10-912 do not apply when a transferor provides a certification of Maryland residence or certification that the transferred property is the transferor's principal residence.

| 1. Transferor Information |                                                                                                                                                                                                                                                                                                                                           |
|---------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of Transferor        | Marcio M. Menendez                                                                                                                                                                                                                                                                                                                        |
| 2. Reasons for Exemption  |                                                                                                                                                                                                                                                                                                                                           |
| Resident Status           | <input checked="" type="checkbox"/> I, Transferor, am a resident of the State of Maryland.<br><input type="checkbox"/> Transferor is a resident entity under § 10-912(A)(4) of the Tax-General Article of the Annotated Code of Maryland, I am an agent of Transferor, and I have authority to sign this document on Transferor's behalf. |
| Principal Residence       | <input type="checkbox"/> Although I am no longer a resident of the State of Maryland, the Property is my principal residence as defined in IRC §121.                                                                                                                                                                                      |

Under penalty of perjury, I certify that I have examined this declaration and that, to the best of my knowledge, it is true, correct, and complete.

| 3a. Individual Transferors                                                                     |                                                                                                                                 |
|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------|
| Witness<br> | Name<br>Marcio M. Menendez<br>Signature<br> |
| 3b. Entity Transferors                                                                         |                                                                                                                                 |
| Witness/Agent<br><br>                                                                          | Name of Entity<br><br>By<br><br>Name<br><br>Title<br><br>                                                                       |



0026100 502

**A-1**

**Certification of Exemption from Withholding Upon Disposition of Maryland Real Estate  
Affidavit of Residence or Principal Residence**

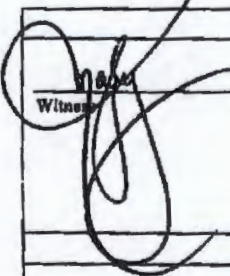
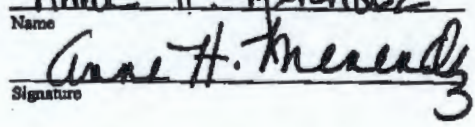
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| 1. Transferor Information |                  |
|---------------------------|------------------|
| Name of Transferor        | Anne H. Menendez |

| 2. Reasons for Exemption |                                                                                                                                                                                                                                                                                                                                           |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Resident Status          | <input checked="" type="checkbox"/> I, Transferor, am a resident of the State of Maryland.<br><input type="checkbox"/> Transferor is a resident entity under § 10-912(A)(4) of the Tax-General Article of the Annotated Code of Maryland, I am an agent of Transferor, and I have authority to sign this document on Transferor's behalf. |
| Principal Residence      | <input type="checkbox"/> Although I am no longer a resident of the State of Maryland, the Property is my principal residence as defined in IRC §121.                                                                                                                                                                                      |

Under penalty of perjury, I certify that I have examined this declaration and that, to the best of my knowledge, it is true, correct, and complete.

| 3a. Individual Transferors                                                                             |                                                                                                                               |
|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <br>Name<br>Witness | Name<br>Anne H. Menendez<br>Signature<br> |

| 3b. Entity Transferors                |                                       |
|---------------------------------------|---------------------------------------|
| Name of Entity<br>By<br>Name<br>Title | Name of Entity<br>By<br>Name<br>Title |



00254031 0001

# State of Maryland Land Instrument Intake Sheet

## Baltimore City County: Baltimore County

Information provided is for the use of the Clerk's Office, State Department of Assessments and Taxation, and County Finance Office only.

(Type or Print in Black Ink Only - All Copies Must Be Legible)

| 1                                                                                             | Type(s) of Instruments                                    | (Check Box 3 if Additional Intake Form is Attached.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                 | IMP FD SURE \$       | 28.00                      |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
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|                                                                                               |                                                           | 1 Deed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Mortgage        | 3 Other 2nd DOT      | Other                      |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
|                                                                                               |                                                           | 2 Deed of Trust                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Lease           |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 2                                                                                             | Conveyance Type                                           | X Improved Sale                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Unimproved Sale | Multiple Account     | Not an Arms-Length Sale(9) |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
|                                                                                               | Check Box                                                 | Arms-Length(1)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Arms-Length(2)  | Arms-Length(3)       | Length Sale(9)             |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 3                                                                                             | Tax Exemptions (if applicable)                            | Recordation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                 | Resd 3486            | Rpt # 23274                |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
|                                                                                               |                                                           | State Transfer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 | SH KC                | Blk # 3342                 |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
|                                                                                               | Cite or Explain Authority                                 | County Transfer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 | Jan 22, 2007         | 12:49 PM                   |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 4                                                                                             | Consideration and Tax Calculations                        | <table border="1"> <tr> <th colspan="2">Consideration Amount</th> <th colspan="2">Purchase Price/Consideration</th> </tr> <tr> <td>Purchase Price/Consideration</td> <td>\$</td> <td>975,000.00</td> <td></td> </tr> <tr> <td>Any New Mortgage</td> <td>\$</td> <td>502,000.00</td> <td></td> </tr> <tr> <td>Balance of Existing Mortgage</td> <td>\$</td> <td></td> <td></td> </tr> <tr> <td>Other:</td> <td>\$</td> <td>375,000.00</td> <td></td> </tr> <tr> <td>2nd Mortgage</td> <td>\$</td> <td></td> <td></td> </tr> <tr> <td>Other:</td> <td>\$</td> <td></td> <td></td> </tr> <tr> <td>Full Cash Value</td> <td>\$</td> <td></td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 | Consideration Amount |                            | Purchase Price/Consideration                                                    |                                                        | Purchase Price/Consideration                                        | \$                            | 975,000.00                                                                                    |                  | Any New Mortgage                                          | \$                                                        | 502,000.00                             |     | Balance of Existing Mortgage | \$ |                           |          | Other:                              | \$                  | 375,000.00                     |                | 2nd Mortgage            | \$ |                                                |    | Other:  | \$ |  |                                        | Full Cash Value | \$       |    |  | <table border="1"> <tr> <th colspan="2">Fees</th> </tr> <tr> <td>Recording Charge</td> <td>\$ 20.00</td> </tr> <tr> <td>Surcharge</td> <td>\$ 20.00</td> </tr> <tr> <td>State Recording Tax</td> <td>\$ 4875.00</td> </tr> <tr> <td>State Transfer Tax</td> <td>\$ 4875.00</td> </tr> <tr> <td>County Transfer Tax</td> <td>\$ 14295.00</td> </tr> <tr> <td>Other</td> <td>\$</td> </tr> <tr> <td>Other</td> <td>\$</td> </tr> </table> |    | Fees |    | Recording Charge | \$ 20.00                | Surcharge | \$ 20.00 | State Recording Tax | \$ 4875.00 | State Transfer Tax                     | \$ 4875.00 | County Transfer Tax | \$ 14295.00 | Other | \$                                 | Other | \$ |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Consideration Amount                                                                          |                                                           | Purchase Price/Consideration                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Purchase Price/Consideration                                                                  | \$                                                        | 975,000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Any New Mortgage                                                                              | \$                                                        | 502,000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Balance of Existing Mortgage                                                                  | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Other:                                                                                        | \$                                                        | 375,000.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 2nd Mortgage                                                                                  | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Other:                                                                                        | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Full Cash Value                                                                               | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Fees                                                                                          |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Recording Charge                                                                              | \$ 20.00                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Surcharge                                                                                     | \$ 20.00                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| State Recording Tax                                                                           | \$ 4875.00                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| State Transfer Tax                                                                            | \$ 4875.00                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| County Transfer Tax                                                                           | \$ 14295.00                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Other                                                                                         | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Other                                                                                         | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 5                                                                                             | Fees                                                      | <table border="1"> <tr> <th colspan="2">Amount of Fees</th> <th>Doc. 1</th> <th>Doc. 2</th> <th>Agent</th> </tr> <tr> <td>Recording Charge</td> <td>\$</td> <td>20.00</td> <td>\$ 20.00</td> <td></td> </tr> <tr> <td>Surcharge</td> <td>\$</td> <td>20.00</td> <td>\$ 20.00</td> <td></td> </tr> <tr> <td>State Recording Tax</td> <td>\$</td> <td>4875.00</td> <td>\$</td> <td></td> </tr> <tr> <td>State Transfer Tax</td> <td>\$</td> <td>4875.00</td> <td>\$</td> <td></td> </tr> <tr> <td>County Transfer Tax</td> <td>\$</td> <td>14295.00</td> <td>\$</td> <td></td> </tr> <tr> <td>Other</td> <td>\$</td> <td></td> <td>\$</td> <td></td> </tr> <tr> <td>Other</td> <td>\$</td> <td></td> <td>\$</td> <td></td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                      |                            | Amount of Fees                                                                  |                                                        | Doc. 1                                                              | Doc. 2                        | Agent                                                                                         | Recording Charge | \$                                                        | 20.00                                                     | \$ 20.00                               |     | Surcharge                    | \$ | 20.00                     | \$ 20.00 |                                     | State Recording Tax | \$                             | 4875.00        | \$                      |    | State Transfer Tax                             | \$ | 4875.00 | \$ |  | County Transfer Tax                    | \$              | 14295.00 | \$ |  | Other                                                                                                                                                                                                                                                                                                                                                                                                                                   | \$ |      | \$ |                  | Other                   | \$        |          | \$                  |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Amount of Fees                                                                                |                                                           | Doc. 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Doc. 2          | Agent                |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Recording Charge                                                                              | \$                                                        | 20.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$ 20.00        |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Surcharge                                                                                     | \$                                                        | 20.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | \$ 20.00        |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| State Recording Tax                                                                           | \$                                                        | 4875.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$              |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| State Transfer Tax                                                                            | \$                                                        | 4875.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | \$              |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| County Transfer Tax                                                                           | \$                                                        | 14295.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$              |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Other                                                                                         | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$              |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Other                                                                                         | \$                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | \$              |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 6                                                                                             | Description of Property                                   | <table border="1"> <tr> <th>District</th> <th>Property Tax ID No. (if Grantor Ltr. Pct.)</th> <th>Block</th> <th>Parcel No.</th> <th>Ver. (Lot)</th> </tr> <tr> <td>09</td> <td>16-00-002841</td> <td>5566/564</td> <td>69</td> <td>148</td> </tr> <tr> <td colspan="5">Subdivision Name</td> </tr> <tr> <td colspan="5">Rolandvue</td> </tr> <tr> <td colspan="5">Location/Address of Property Being Conveyed To</td> </tr> <tr> <td colspan="5">923 Rolandvue Avenue, Ruxton, MD 21204</td> </tr> <tr> <td colspan="5">Other Property Identifiers (if applicable)</td> </tr> <tr> <td colspan="5">Water Meter Account No.</td> </tr> <tr> <td colspan="5">Residential (R) or Non-Residential (N)</td> </tr> <tr> <td colspan="5">Partial Conveyance (Y) or Full (N)</td> </tr> <tr> <td colspan="5">Description/Amt. of Sq Ft/Acreage Transferred:</td> </tr> <tr> <td colspan="5">If Partial Conveyance, List Improvements Conveyed:</td> </tr> <tr> <td colspan="5">Doc. 1 - Grantor(s) Name(s)</td> </tr> <tr> <td colspan="5">Doc. 2 - Grantor(s) Name(s)</td> </tr> <tr> <td colspan="5">Doc. 1 - Owner(s) of Record, if Different from Grantor(s)</td> </tr> <tr> <td colspan="5">Doc. 2 - Owner(s) of Record, if Different from Grantor(s)</td> </tr> <tr> <td colspan="5">Doc. 1 - Grantor(s) Name(s)</td> </tr> <tr> <td colspan="5">Doc. 2 - Grantor(s) Name(s)</td> </tr> <tr> <td colspan="5">New Owner(s) (Grantor(s) Name(s) Address)</td> </tr> <tr> <td colspan="5">923 Rolandvue Avenue, Ruxton, MD 21204</td> </tr> <tr> <td colspan="5">Doc. 1 - Additional Name(s) to be Indexed (if desired)</td> </tr> <tr> <td colspan="5">Doc. 2 - Additional Name(s) to be Indexed (if desired)</td> </tr> <tr> <td colspan="5">AEN AMRO Mortgage Group, Inc.</td> </tr> </table> |                 |                      |                            | District                                                                        | Property Tax ID No. (if Grantor Ltr. Pct.)             | Block                                                               | Parcel No.                    | Ver. (Lot)                                                                                    | 09               | 16-00-002841                                              | 5566/564                                                  | 69                                     | 148 | Subdivision Name             |    |                           |          |                                     | Rolandvue           |                                |                |                         |    | Location/Address of Property Being Conveyed To |    |         |    |  | 923 Rolandvue Avenue, Ruxton, MD 21204 |                 |          |    |  | Other Property Identifiers (if applicable)                                                                                                                                                                                                                                                                                                                                                                                              |    |      |    |                  | Water Meter Account No. |           |          |                     |            | Residential (R) or Non-Residential (N) |            |                     |             |       | Partial Conveyance (Y) or Full (N) |       |    |  |  | Description/Amt. of Sq Ft/Acreage Transferred: |  |  |  |  | If Partial Conveyance, List Improvements Conveyed: |  |  |  |  | Doc. 1 - Grantor(s) Name(s) |  |  |  |  | Doc. 2 - Grantor(s) Name(s) |  |  |  |  | Doc. 1 - Owner(s) of Record, if Different from Grantor(s) |  |  |  |  | Doc. 2 - Owner(s) of Record, if Different from Grantor(s) |  |  |  |  | Doc. 1 - Grantor(s) Name(s) |  |  |  |  | Doc. 2 - Grantor(s) Name(s) |  |  |  |  | New Owner(s) (Grantor(s) Name(s) Address) |  |  |  |  | 923 Rolandvue Avenue, Ruxton, MD 21204 |  |  |  |  | Doc. 1 - Additional Name(s) to be Indexed (if desired) |  |  |  |  | Doc. 2 - Additional Name(s) to be Indexed (if desired) |  |  |  |  | AEN AMRO Mortgage Group, Inc. |  |  |  |  |
| District                                                                                      | Property Tax ID No. (if Grantor Ltr. Pct.)                | Block                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Parcel No.      | Ver. (Lot)           |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 09                                                                                            | 16-00-002841                                              | 5566/564                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 69              | 148                  |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Subdivision Name                                                                              |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Rolandvue                                                                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Location/Address of Property Being Conveyed To                                                |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 923 Rolandvue Avenue, Ruxton, MD 21204                                                        |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Other Property Identifiers (if applicable)                                                    |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Water Meter Account No.                                                                       |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Residential (R) or Non-Residential (N)                                                        |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Partial Conveyance (Y) or Full (N)                                                            |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Description/Amt. of Sq Ft/Acreage Transferred:                                                |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| If Partial Conveyance, List Improvements Conveyed:                                            |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Grantor(s) Name(s)                                                                   |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 2 - Grantor(s) Name(s)                                                                   |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Owner(s) of Record, if Different from Grantor(s)                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 2 - Owner(s) of Record, if Different from Grantor(s)                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Grantor(s) Name(s)                                                                   |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 2 - Grantor(s) Name(s)                                                                   |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| New Owner(s) (Grantor(s) Name(s) Address)                                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 923 Rolandvue Avenue, Ruxton, MD 21204                                                        |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Additional Name(s) to be Indexed (if desired)                                        |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 2 - Additional Name(s) to be Indexed (if desired)                                        |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| AEN AMRO Mortgage Group, Inc.                                                                 |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 7                                                                                             | Transferred From                                          | <table border="1"> <tr> <td>Doc. 1 - Grantor(s) Name(s)</td> <td>Doc. 2 - Grantor(s) Name(s)</td> </tr> <tr> <td>Marcio M. Menendez</td> <td>Joseph K. Fox</td> </tr> <tr> <td>Anne H. Menendez</td> <td>ToniAnn E. Fox</td> </tr> <tr> <td>Doc. 1 - Owner(s) of Record, if Different from Grantor(s)</td> <td>Doc. 2 - Owner(s) of Record, if Different from Grantor(s)</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                 |                      |                            | Doc. 1 - Grantor(s) Name(s)                                                     | Doc. 2 - Grantor(s) Name(s)                            | Marcio M. Menendez                                                  | Joseph K. Fox                 | Anne H. Menendez                                                                              | ToniAnn E. Fox   | Doc. 1 - Owner(s) of Record, if Different from Grantor(s) | Doc. 2 - Owner(s) of Record, if Different from Grantor(s) |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Grantor(s) Name(s)                                                                   | Doc. 2 - Grantor(s) Name(s)                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Marcio M. Menendez                                                                            | Joseph K. Fox                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Anne H. Menendez                                                                              | ToniAnn E. Fox                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Owner(s) of Record, if Different from Grantor(s)                                     | Doc. 2 - Owner(s) of Record, if Different from Grantor(s) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 8                                                                                             | Transferred To                                            | <table border="1"> <tr> <td>Doc. 1 - Grantor(s) Name(s)</td> <td>Doc. 2 - Grantor(s) Name(s)</td> </tr> <tr> <td>Joseph K. Fox</td> <td>Joseph G. Blume, Jr.</td> </tr> <tr> <td>ToniAnn E. Fox</td> <td></td> </tr> <tr> <td colspan="2">New Owner(s) (Grantor(s) Name(s) Address)</td> </tr> <tr> <td colspan="2">923 Rolandvue Avenue, Ruxton, MD 21204</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                 |                      |                            | Doc. 1 - Grantor(s) Name(s)                                                     | Doc. 2 - Grantor(s) Name(s)                            | Joseph K. Fox                                                       | Joseph G. Blume, Jr.          | ToniAnn E. Fox                                                                                |                  | New Owner(s) (Grantor(s) Name(s) Address)                 |                                                           | 923 Rolandvue Avenue, Ruxton, MD 21204 |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Grantor(s) Name(s)                                                                   | Doc. 2 - Grantor(s) Name(s)                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Joseph K. Fox                                                                                 | Joseph G. Blume, Jr.                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| ToniAnn E. Fox                                                                                |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| New Owner(s) (Grantor(s) Name(s) Address)                                                     |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 923 Rolandvue Avenue, Ruxton, MD 21204                                                        |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 9                                                                                             | Other Names To Be Indexed                                 | <table border="1"> <tr> <td>Doc. 1 - Additional Name(s) to be Indexed (if desired)</td> <td>Doc. 2 - Additional Name(s) to be Indexed (if desired)</td> </tr> <tr> <td></td> <td>AEN AMRO Mortgage Group, Inc.</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                      |                            | Doc. 1 - Additional Name(s) to be Indexed (if desired)                          | Doc. 2 - Additional Name(s) to be Indexed (if desired) |                                                                     | AEN AMRO Mortgage Group, Inc. |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Doc. 1 - Additional Name(s) to be Indexed (if desired)                                        | Doc. 2 - Additional Name(s) to be Indexed (if desired)    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
|                                                                                               | AEN AMRO Mortgage Group, Inc.                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 10                                                                                            | Contact/Mail Information                                  | <table border="1"> <tr> <td colspan="2">Instrument Submitted By or Contact Person</td> <td colspan="2">Return to Contact Person</td> </tr> <tr> <td>Name: Tristan Sills</td> <td>FILE: 1739RPK</td> <td colspan="2"><input type="checkbox"/></td> </tr> <tr> <td>Firm: RGS Fountainhead Title</td> <td></td> <td colspan="2"><input type="checkbox"/></td> </tr> <tr> <td>Address: 2 Village Square</td> <td></td> <td colspan="2"><input checked="" type="checkbox"/></td> </tr> <tr> <td>Suite 254, Baltimore, MD 21211</td> <td>(410) 435-4665</td> <td colspan="2">Return Address Provided</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                 |                      |                            | Instrument Submitted By or Contact Person                                       |                                                        | Return to Contact Person                                            |                               | Name: Tristan Sills                                                                           | FILE: 1739RPK    | <input type="checkbox"/>                                  |                                                           | Firm: RGS Fountainhead Title           |     | <input type="checkbox"/>     |    | Address: 2 Village Square |          | <input checked="" type="checkbox"/> |                     | Suite 254, Baltimore, MD 21211 | (410) 435-4665 | Return Address Provided |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Instrument Submitted By or Contact Person                                                     |                                                           | Return to Contact Person                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Name: Tristan Sills                                                                           | FILE: 1739RPK                                             | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Firm: RGS Fountainhead Title                                                                  |                                                           | <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Address: 2 Village Square                                                                     |                                                           | <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Suite 254, Baltimore, MD 21211                                                                | (410) 435-4665                                            | Return Address Provided                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| 11                                                                                            | Assessment Information                                    | <table border="1"> <tr> <td colspan="2">X Yes No Will the property being conveyed be the grantee's principal residence?</td> </tr> <tr> <td colspan="2">Yes X No Does transfer include personal property? If yes, identify:</td> </tr> <tr> <td colspan="2">Yes X No Was property surveyed? If yes, attach copy of survey (if recorded, no copy required)</td> </tr> </table>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                 |                      |                            | X Yes No Will the property being conveyed be the grantee's principal residence? |                                                        | Yes X No Does transfer include personal property? If yes, identify: |                               | Yes X No Was property surveyed? If yes, attach copy of survey (if recorded, no copy required) |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| X Yes No Will the property being conveyed be the grantee's principal residence?               |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
| Yes X No Does transfer include personal property? If yes, identify:                           |                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                 |                      |                            |                                                                                 |                                                        |                                                                     |                               |                                                                                               |                  |                                                           |                                                           |                                        |     |                              |    |                           |          |                                     |                     |                                |                |                         |    |                                                |    |         |    |  |                                        |                 |          |    |  |                                                                                                                                                                                                                                                                                                                                                                                                                                         |    |      |    |                  |                         |           |          |                     |            |                                        |            |                     |             |       |                                    |       |    |  |  |                                                |  |  |  |  |                                                    |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                                           |  |  |  |  |                                                           |  |  |  |  |                             |  |  |  |  |                             |  |  |  |  |                                           |  |  |  |  |                                        |  |  |  |  |                                                        |  |  |  |  |                                                        |  |  |  |  |                               |  |  |  |  |
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BALTIMORE COUNTY CIRCUIT COURT (Land Records) SM 21-003, p. 0513, MSA, CE62, 24958, Date available 02/09/2007, Printed 10/17/2012

APPLICATION PAID RECEIPT

White - Clerk's Office  
Grey - SSDAT  
Pink - Office of Finance  
Goldenrod - Preparer  
AOC-CC-300 (6/95)



0035400 0001

**Addendum**  
**State of Maryland Land Instrument Intake Sheet**  
☐ Baltimore City ☒ County: Baltimore County

The addendum form should be used when one transaction involves more than two instruments.  
 Each instruments should be itemized in accordance with Section No. 1 of the Intake Sheet.

(Type or Print in Black Ink Only - All Copies Must Be Legible)

FILE: 1739RPK

|                                         |                                                            |          |                                                            |        |        |
|-----------------------------------------|------------------------------------------------------------|----------|------------------------------------------------------------|--------|--------|
| 5<br>(Continued)                        | Amount of Fees                                             | Doc. 3   | Doc. 4                                                     | Doc. 5 | Doc. 6 |
|                                         | Recording Charge                                           | \$ 20.00 | \$                                                         | \$     | \$     |
|                                         | Fees Surcharge                                             | \$ 20.00 | \$                                                         | \$     | \$     |
|                                         | State Recording Tax                                        | \$       | \$                                                         | \$     | \$     |
|                                         | State Transfer Tax                                         | \$       | \$                                                         | \$     | \$     |
|                                         | County Transfer Tax                                        | \$       | \$                                                         | \$     | \$     |
|                                         | Other                                                      | \$       | \$                                                         | \$     | \$     |
|                                         | Other                                                      | \$       | \$                                                         | \$     | \$     |
| 7<br>(Continued)<br>Transferred<br>From | Doc. 3 - Grantor(s) Name(s)                                |          | Doc. 4 - Grantor(s) Name(s)                                |        |        |
|                                         | Joseph F. Fox                                              |          |                                                            |        |        |
|                                         | Toniann E. Fox                                             |          |                                                            |        |        |
|                                         | Doc. 5 - Grantor(s) Name(s)                                |          | Doc. 6 - Grantor(s) Name(s)                                |        |        |
|                                         |                                                            |          |                                                            |        |        |
|                                         | Doc. 3 - Ownership of Record, if Different from Section 1  |          | Doc. 4 - Ownership of Record, if Different from Grantor(s) |        |        |
|                                         |                                                            |          |                                                            |        |        |
|                                         | Doc. 5 - Ownership of Record, if Different from Grantor(s) |          | Doc. 6 - Ownership of Record, if Different from Grantor(s) |        |        |
| 8<br>(Continued)<br>Transferred<br>To   | Doc. 3 - Grantee(s) Name(s)                                |          | Doc. 4 - Grantee(s) Name(s)                                |        |        |
|                                         | Jack Adams                                                 |          |                                                            |        |        |
|                                         | Doc. 5 - Grantee(s) Name(s)                                |          | Doc. 6 - Grantee(s) Name(s)                                |        |        |
|                                         |                                                            |          |                                                            |        |        |
|                                         | Doc. 3 - Additional Name(s) to be Indexed (Optional)       |          | Doc. 4 - Additional Name(s) to be Indexed (Optional)       |        |        |
|                                         | JPMorgan Chase Bank, N.A.                                  |          |                                                            |        |        |
|                                         | Doc. 5 - Additional Name(s) to be Indexed (Optional)       |          | Doc. 6 - Additional Name(s) to be Indexed (Optional)       |        |        |
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| Special Instructions                    | Special Recording Instructions (if any)                    |          |                                                            |        |        |
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RECORDATION TAX NOT REQUIRED  
 Director of Budget and Finance  
 BALTIMORE COUNTY, MARYLAND  
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Distribution: White - Clerk's Office  
 Canary - SSCAT  
 Pink - Office of Finance  
 Goldenrod - Preparer  
 AOC-CC-300 (6/96)

**FRANCIS X. BORGERDING, JR.**

*Attorney at Law*

MERCANTILE BUILDING - SUITE 600  
409 WASHINGTON AVENUE  
TOWSON, MARYLAND 21204  
(410) 296-6820  
FAX (410) 296-6884

October 16, 2012

John E. Beverungen  
Administrative Law Judge  
for Baltimore County  
Office of Administrative Hearings  
105 West Chesapeake Avenue  
Suite 103  
Towson, Maryland 21204

RECEIVED

OCT 17 2012

OFFICE OF ADMINISTRATIVE HEARINGS

RE: Knott, Petitioners/Owners  
Case No.: 20130002-A

Dear Mr. Beverungen:

Enclosed herewith for filing please find the Protestants' Response to Motion for Reconsideration and to Alter/Amend Order with regard to the above-captioned matter. Thank you.

Very truly yours,

  
FRANCIS X. BORGERDING, JR.

FXBJr:bjk  
Enclosure



IN RE: PETITION FOR ADMINISTRATIVE  
VARIANCE  
1005 Roland View Road  
Henry A. and Pamela B. Knott  
Petitioners/Owners

BEFORE THE  
OFFICE OF ADMINISTRATIVE  
HEARINGS FOR  
BALTIMORE COUNTY  
Case No.: 20130002-A

\* \* \* \* \*

**PROTESTANTS' RESPONSE TO MOTION FOR RECONSIDERATION AND  
TO ALTER/AMEND ORDER**

Protestants, Mr. and Mrs. Joseph K. Fox, Nick Griffith, Edward and Shaun Latchford, through their attorney, Francis X. Borgerding, Jr., files their Response to the Motion for Reconsideration and to Alter/Amend Order and say:

1. The ALJ for Baltimore County denied Petitioners' requested Variance, as amended at the hearing held on September 7, 2012 for a detached, accessory garage in the front and side yard of Petitioners' property adjacent to the above Protestants' property four feet off their property line.

2. Petitioners seek reconsideration of the ALJ's decision rendered in the above-captioned case that states the Petitioners will need a Variance to put the proposed garage in their rear yard. Protestants assert that rather than amending the Administrative Law Judge's Order, Petitioners should locate their garage in the rear yard and file a Petition to request a Variance which the Protestants will not oppose or, in the alternative, file a Petition for Variance to request construction of the garage in their side yard further away towards the rear of their property. The testimony and evidence before the Zoning Commissioner established that there is ample room on the Petitioners' lot in the rear or side yard to place their proposed garage instead of Petitioners' requested placement of the

garage four feet off the Protestants' property line where the garage would, according to testimony of the Protestants, become an aesthetic eyesore and lower their property values.

3. If it is the ALJ's position that the garage can be placed in the Petitioners' rear yard without a Variance, then the Petitioners should file a Petition for a Variance or Special Hearing requesting their desired location in the rear yard and the ALJ can rule upon the requested relief to settle any controversy between the Zoning Commissioner and the Zoning Supervisor. See Section 500 of the Baltimore County Zoning Regulations.

4. Protestants assert that there is no legal or factual basis for the granting of Petitioners' Motion for Reconsideration and to Alter/Amend the Order entered in this case on September 13, 2012 by the Administrative Law Judge. The ALJ is not bound by the opinion of an expert who testifies before him or her. See *People's Counsel v. Beachwood*, 107 Md. App. 627 (1995).

5. The ALJ can weigh the testimony from all witnesses beforehand, both lay and expert, and render his opinion and he is not bound by expert testimony presented before him.

6. The ALJ found in his September 13, 2012 decision that the Petitioners' lot is not a double frontage lot based upon the facts and circumstances of the case as presented to the Administrative Law Judge. It is undisputed that the lot fronts on one public street and a private access road. Protestants assert that it is the province of the ALJ according to the Baltimore County Code and the Baltimore County Zoning Regulations to rule on such an issue in the case presented before the ALJ and that such a finding is a matter of discretion well within the ALJ's legal ability to so find.

7. It should be noted that Exhibit R-4 of Petitioners' Motion for Reconsideration which is a page of the Zoning Commissioner's Policy Manual specifically page 4-1.1 shows illustrations of double frontage lots. However, the lots are bounded by two streets not a street and a private access drive.

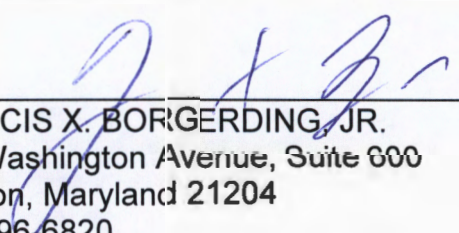
8. Protestants assert that due to the ALJ's finding that the Petitioners' lot is not a double frontage lot would be natural to conclude that a Petition for Variance for placement in the rear yard by Petitioners would be granted in light of the ALJ's finding.

9. The Administrative Law Judge, in his opinion, found that the Petitioners' proposed garage "could be situated in this area east of Petitioners' driveway, behind Petitioners' home".

10. Protestants assert that the ALJ's findings are not erroneous and, therefore, the Petitioners' reconsideration should be denied.

**WHEREFORE**, Protestants pray that the Administrative Law Judge for Baltimore County:

- a. Deny Petitioners' Motion for Reconsideration filed in the above-captioned case;
- and
- b. For such other and further relief as the nature of Protestants' cause may require.

  
\_\_\_\_\_  
FRANCIS X. BORGERDING, JR.  
409 Washington Avenue, Suite 600  
Towson, Maryland 21204  
410-296-6820  
ATTORNEY FOR PROTESTANTS

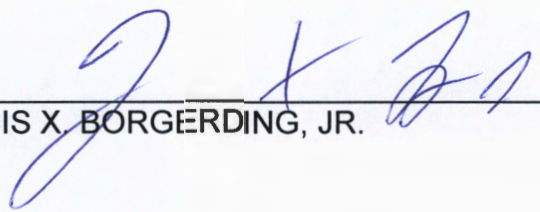


**CERTIFICATE OF MAILING**

I HEREBY CERTIFY, that on this 16 day of October, 2012,  
a copy of the foregoing was mailed, postage prepaid, to:

Howard L. Alderman, Jr., Esquire  
Levin & Gann, P.A.  
8<sup>th</sup> Floor, Nottingham Centre  
502 Washington Avenue  
Towson, Maryland 21204

Peter Max Zimmerman, Esquire  
People's Counsel for Baltimore County  
Jefferson Building, Suite 204  
105 West Chesapeake Avenue  
Towson, Maryland 21204

  
\_\_\_\_\_  
FRANCIS X. BORGERDING, JR.

## Debra Wiley - Fwd: RE: Knott case

---

**From:** John Beverungen  
**To:** Debra Wiley  
**Date:** 10/16/2012 11:56 AM  
**Subject:** Fwd: RE: Knott case

---

for file

>>> "Francis X. Borgerding, Jr." <borgerdinglaw@aol.com> 10/16/12 11:45 AM >>>

Judge,

Yes. Hope to have it today. Going out of town tomorrow.

Frank Borgerding

---

**From:** John Beverungen [mailto:jbeverungen@baltimorecountymd.gov]  
**Sent:** Tuesday, October 16, 2012 11:20 AM  
**To:** borgerdinglaw@aol.com; halderman@levingann.com  
**Subject:** Knott case

Mr. Borgerding,

As you know, the Petitioner has filed a motion for reconsideration. Will you be filing an opposition?

John Beverungen

HOWARD L. ALDERMAN, JR.  
halderman@LevinGann.com

DIRECT DIAL  
410-321-4640

LAW OFFICES  
**LEVIN & GANN**  
A PROFESSIONAL ASSOCIATION  
NOTTINGHAM CENTRE  
502 WASHINGTON AVENUE  
8<sup>th</sup> Floor  
TOWSON, MARYLAND 21204  
410-321-0600  
TELEFAX 410-296-2801

ELLIS LEVIN (1893-1960)  
CALMAN A. LEVIN (1930-2003)

October 9, 2012

RECEIVED

OCT 09 2012

OFFICE OF ADMINISTRATIVE HEARINGS

The Honorable John E. Beverungen,  
Administrative Law Judge  
Baltimore County Office of Administrative Hearings  
105 W. Chesapeake Avenue, Suite 103  
Towson, Maryland 21204

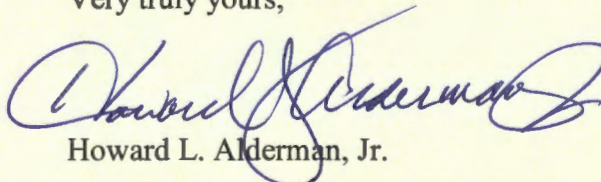
RE: 1005 Rolandvue Road  
Henry A. and Patricia B. Knott, Petitioners  
**Case No. 2013-0002-A**  
*Motion for Reconsideration*

Dear Judge Beverungen:

Enclosed, please accept for filing the enclosed Motion for Reconsideration in the above-referenced case. This Motion is filed within thirty (30) days of your Order, issued September 13, 2012. Therefore, the filing of this Motion, in accordance with the *Code of Baltimore County Regulations*, Title 2, Chapter 1, Rule 4K., shall stay all further proceedings in the matter, including the time limits/deadlines for the filing of an appeal.

Should you need any additional information in this regard, please do not hesitate to contact me.

Very truly yours,



Howard L. Alderman, Jr.

HLA/gk  
Enclosure

c (w/encl.): Mr. and Mrs. Henry A. Knott  
Francis X. Borgerding, Jr., Esquire  
People's Counsel for Baltimore County



RECEIVED

OCT 09 2012

IN RE: PETITION FOR  
ADMINISTRATIVE VARIANCE  
(1005 Rolandvue Road)

*Henry A. and Pamela B. Knott,*

Petitioners/Owners

BEFORE THE  
OFFICE OF ADMINISTRATIVE HEARINGS  
OFFICE OF ADMINISTRATIVE

HEARINGS FOR

BALTIMORE COUNTY

Case No.: 2013-0002-A

**MOTION FOR RECONSIDERATION**  
**AND TO ALTER/AMEND ORDER**

Henry A. Knott and Pamela B. Knott (collectively the “Owners” or “Petitioners”) by and through the undersigned legal counsel, in accordance with the *Code of Baltimore County Regulations*, Title 2, Chapter 1, Rule 4K., hereby move that the *Order* of the Administrative Law Judge (“ALJ”), dated September 13, 2012 (the “Order”), be reconsidered, altered and/or amended. In support of their collective request, the Owners state as follows:

1. The ALJ for Baltimore County denied Petitioners’ requested variance relief, as amended at the hearing held on September 7, 2012 (the “hearing”), for a detached, accessory garage as shown on the site plan that accompanied the Petition for Administrative Variance [accepted into evidence as Petitioners’ Exhibit No. 3] for the property owned by the Petitioners (the “subject property”).

2. At the time of the hearing, no adverse comments had been submitted by any

of the County reviewing agencies. [Order at 1.]

3. The ALJ accepted Mitchell Kellman as an expert in the *Baltimore County Zoning Regulations* (“**BCZR**”) and zoning issues generally on behalf of the Petitioners. [Order at 2.]

4. Notwithstanding the uncontradicted, expert testimony of Mr. Kellman, the ALJ reasoned that a detached, accessory garage could be constructed on the east side of Petitioners’ existing driveway, behind the rear plane of Petitioners’ existing home and that such construction in that location “would not require variance relief.” [Order at 3.]

5. Following issuance of the Order and delivery to Petitioners, on or about September 26, 2012, Petitioners wrote directly to the ALJ (“**Petitioners’ Letter**”), advising of Petitioners’ interpretation of the outcome of a meeting among Petitioners and W. Carl Richards, Jr., Zoning Supervisor for Baltimore County (“**Zoning Supervisor**”).

6. Petitioners’ Letter recites that the Zoning Supervisor: (i) “will not ‘sign off’ on locating a garage structure anywhere within the 50 foot street setback line along Rolandvue Road [as suggested by the ALJ in the Order at page 3] without further written clarification from” the ALJ; and (ii) advised the Petitioners that the subject property “is within a recorded subdivision (Plat #2 Rolandvue OTG [Plat Book No.] 32 Folio 89) (the “**Plat**”) which may also restrict the proposed garage location within the 50 foot street setback of Rolandvue Road.” A copy of Petitioners’ Letter was mailed to all counsel of record and is attached hereto and incorporated herein as **Exhibit “R-1”**.



7. The ALJ, in response to the Petitioners' Letter, on October 1, 2012, sent Petitioners a response ("**ALJ Response**") advising, in regard to construction of a detached garage along Rolandvue Road in the rear of Petitioners' home, that: (i) "it was the Protestants (and their counsel) who suggested the garage be located in this area"; (ii) there is "nothing in the September 13, 2012 Order that would preclude" Petitioners from locating the garage in that area; (iii) notwithstanding the [uncontradicted] expert opinion of Mr. Kellman that the subject property was a "double frontage lot" and, therefore the garage "would need to satisfy the 50' principal structure setback", the ALJ disagreed that the subject property was a "double frontage lot because it does not front onto two streets as shown as page 4-1.1 of the *Zoning Commissioner's Policy Manual*" ("**ZCPM**"); (iv) the ALJ is "of the opinion that the garage can be located in the rear yard" provided regulations applicable to accessory structures are observed; and (v) [contrary to the determination of the Zoning Supervisor] the proposed garage need only comply with regulations applicable to accessory structures, rather than the 50' setback shown on Petitioners' Exhibit No. 2, the Plat showing the subject property. A copy of the ALJ Response was mailed to all counsel of record, to the Zoning Supervisor, and is attached hereto and incorporated herein as **Exhibit "R-2"**.

8. The Zoning Supervisor sent the Petitioners a letter, dated October 3, 2012 ("**Zoning Supervisor's Letter**"), after reading the ALJ Response, and advised the Petitioners that: (i) the Zoning Office respectfully disagreed with the ALJ and "in the absence of an order specifically granting relief from the recorded setback line [parallel to Rolandvue Road],



we would preclude you from building in that location”; (ii) the Zoning Office considers the lot layout of the subject property and orientation of the dwelling located thereon ‘unique’; and (iii) “placing an accessory building in front of the recorded street front setback line is a dangerous precedent that” the Zoning Office “cannot condone”. A copy of the Zoning Supervisor’s Letter was mailed to all counsel of record and is attached hereto and incorporated herein as **Exhibit “R-3”**.

9. To opine, in both the Order and the ALJ Response, that the proposed garage could be located on the east of Petitioners’ existing drive, behind their home, adjacent to Rolandvue Road, the ALJ had to ignore the uncontradicted testimony of Petitioners’ zoning expert Mitchell Kellman.

10. Deference to an agency’s decision has long been recognized, especially when the matter in dispute involves areas within that agency’s particular realm of expertise. *People’s Counsel for Baltimore County v. Dorothy Surina*, 400 Md. 662, 681 (2007)

11. Judicial deference to agency expertise is less deferential on issues of law. *Charles County Department of Social Services v. Vann*, 382 Md. 286, 295 (2004). “Even with conclusions of law, however, an agency’s legal interpretation of the statute it administers or of its own regulations is entitled to some deference from the courts. *Id.* at 295-96. That deference to the position of the administrative agency is warranted because it is that agency’s task:

to interpret the ordinances and regulations the agency itself promulgated. Thus,

“[e]ven though the decision of the Board of Appeals was based on the law, its expertise should be taken into consideration and its decision should be afforded appropriate deference in our analysis of whether it was ‘premised upon an erroneous conclusion of law.’” *Surina*, 400 Md. at 682-683 (citations omitted).

12. The ZCPM at Section 400.1.d(2)(a) provides that “accessory structures/uses on double-frontage lots shall not be closer to a street right-of-way line than the setback required for a principal dwelling.” (ZCPM at page 4-1.1)

13. Drawing (A) of the ZCPM, in the bottom left-hand corner, depicts the subject property and shows clearly that the accessory structure must meet the principal building setback. A copy of page 4-1.1 of the ZCPM is attached hereto and incorporated herein as **Exhibit “R-4”**.

14. Unlike the Petitioners, Protestants provided no expert testimony or interpretation of the *Baltimore County Zoning Regulations* that the proposed garage did not have to meet principal building setbacks imposed by the BCZR and the Plat or that the garage could be located adjacent to Rolandvue Road by meeting only the requirements of BCZR § 400.1.

15. The ALJ opined that based on “photographs submitted by the Protestants, it would certainly appear as if a garage could be situated in this area [east of Petitioners’ driveway, behind Petitioners’ home, within the principal structure setback from Rolandvue Road and imposed by the Plat].

16. Based upon the photographic evidence of the Protestants, the ALJ erroneously



concluded that the “Petitioners have another alternative [other than that requiring the requested relief] to locate the garage **that would not require variance relief.**” Order at 3.

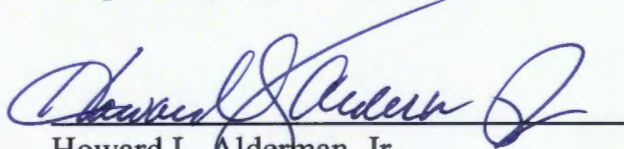
(Emphasis supplied.)

FOR ALL OF THE FOREGOING REASONS, the Owners respectfully request that the ALJ:

- A. Reconsider the Order issued September 13, 2012; and
- B. Revise, alter and amend the Order, by finding that: (i) the subject property is a ‘double-frontage’ lot; (ii) all existing and proposed structures, including without limitation accessory structures, located behind the existing dwelling on the subject property must meet the principal building setback imposed by the BCZR and the Plat; (iii) the relief requested by Petitioners is, as testified to by their expert, the minimum relief necessary to construct an accessory garage on the subject property; (iv) the subject property, based on its shape and topographical changes, is unique [Order at 3]; (v) absent a grant of the relief requested, the subject property is impacted in a disproportionate manner due to the shape, topography and double-frontage configuration; (vi) the minimum relief requested is in strict harmony with the spirit and intent of the BCZR given the myriad of constraints imposed on the subject property; and GRANT the amended relief requested, together with such further relief as the nature of this case may require.



Respectfully submitted,



Howard L. Alderman, Jr.  
Levin & Gann, P.A.  
8<sup>th</sup> Floor, Nottingham Centre  
502 Washington Avenue  
Towson, Maryland 21204  
410.321.0600 [voice]  
410.296.2801 [fax]  
[halderman@LevinGann.com](mailto:halderman@LevinGann.com) [e-mail]  
Attorneys for Petitioners/Owners

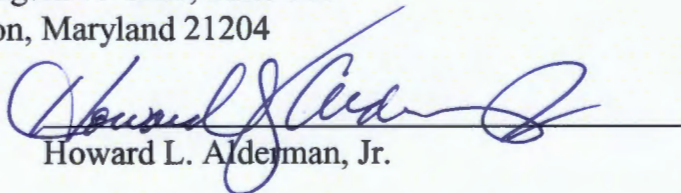
**CERTIFICATE OF SERVICE**

I HEREBY CERTIFY that on this 9<sup>th</sup> day of October, a copy of the foregoing Motion for Reconsideration and to Alter/Amend Order and the exhibits attached thereto were mailed via First-Class, United States Mail to the following:

Peter Max Zimmerman, People's Counsel for Baltimore County  
Carole S. Demilio, Deputy People's Counsel for Baltimore County  
Jefferson Building, Suite 204  
105 West Chesapeake Avenue  
Towson, Maryland 21204

and to

Francis X. Borgerding, Jr., Esquire  
409 Washington Avenue, Suite 600  
Towson, Maryland 21204



Howard L. Alderman, Jr.

Henry and Pamela Knott  
1005 Rolandvue Road  
Towson, Maryland 21204

September 26, 2012

John E. Beverungen  
Administrative Law judge of Baltimore County  
105 West Chesapeake Ave., Suite 103  
Towson, Maryland 21204

Dear Mr. Beverungen,

We met with Mr. Carl Richards of the Baltimore County Zoning Office this morning. After reviewing your ruling, Mr. Richards stated that he will not "sign off" on locating a garage structure anywhere within the 50 foot street setback line along Rolandvue Road without further written clarification from you. He further stated that our residence is within a recorded subdivision (Plat #2 Rolandvue OTG 32 Folio 89) which also may restrict the proposed garage location within the 50 foot street setback of Rolandvue Road.

We are again grateful to you for your time and consideration of this matter.

Sincerely,

Chip and Pam Knott

Cc: Howard L. Alderman, Jr., Esquire  
Francis X. Borgerding, Jr., Esquire  
409 Washington Avenue, Suite 600  
Towson, MD 212104

RECONSIDERATION  
EXHIBIT

**R-1**





KEVIN KAMENETZ  
County Executive

October 1, 2012

LAWRENCE M. STAHL  
Managing Administrative Law Judge  
JOHN E. BEVERUNGEN  
TIMOTHY M. KOTROCO  
Administrative Law Judges

Henry A. and Pamela B. Knott  
1005 Rolandvue Road  
Towson, Maryland 21204

Re: Petition for Administrative Variance  
Case No. 2013-0002-A / 1005 Rolandvue Road

Dear Mr. and Mrs. Knott:

I am in receipt of your letter dated September 26, 2012 regarding the above case. You have indicated that Mr. Richards requested written clarification from me concerning the construction of a garage along Rolandvue Road, which is actually the rear yard of your home.

As you will recall from the hearing, it was the Protestants (and their counsel) who suggested the garage be located in this area. Photographs were submitted (Protestants Exhibits 2 and 3) showing the area in question, and the Protestants indicated they would not object to the structure being positioned in that location. There is also nothing in the September 13, 2012 Order that would preclude you from locating the garage in this location.

The issue of the 50' setback arose when Mr. Kellman opined you had a "double frontage" lot, and would need to satisfy the 50' principal structure setback as a result. I do not agree this is a double frontage lot because it does not front onto two streets, as shown as page 4-1.1 of the Zoning Commissioner's Policy Manual (ZCPM). I am of the opinion the garage can be located in your rear yard provided you observe the requirements of Baltimore County Zoning Regulations (B.C.Z.R.) § 400, which provides (among other things) that such accessory buildings must be located at least 2 ½ feet from side and rear lot lines.

The final issue in your letter concerned the fact that your lot is included within a recorded subdivision. That is of course correct, and Petitioners' Exhibit 2 was a copy of the Rolandvue Plat, and your residence is shown as Lot 6 thereon. The Plat shows a 50' minimum building setback that I believe applies to the principal structure, and you have complied with this requirement, as shown on the zoning plan admitted as Petitioners' Exhibit 3. As noted above, I believe that accessory structures (i.e., a garage) would need to comply with B.C.Z.R. § 400 rather than the 50' setback shown on the plat.

Sincerely,

JOHN E. BEVERUNGEN  
Administrative Law Judge  
for Baltimore County

JEB:dlw

c: Howard L. Alderman, Jr., Esquire, Levin & Gann, P.A., Nottingham Centre, 8<sup>th</sup> Floor,  
502 Washington Avenue, Towson, MD 21204  
Francis X. Borgerding, Esquire, 409 Washington Avenue, Suite 600,  
Towson, MD 21204  
W. Carl Richards, Jr., Supervisor, Zoning Review Office, PAI

RECONSIDERATION  
EXHIBIT

R-2



KEVIN KAMENETZ  
County Executive

ARNOLD JABLON  
Deputy Administrative Officer  
Director, Department of Permits,  
Approvals & Inspections

October 3, 2012

Henry A. & Pamela Knott  
1005 Rolandvue Road  
Towson, MD 21204

Re: Zoning Variance Case #2013-0002-A, 1005 Rolandvue Road

Dear Mr. & Mrs. Knott:

I have received a copy of a letter from John E. Beverungen, ALJ, regarding the above referenced case and the placement of a garage within the recorded front street setback area of your lot within your subdivision. Mr. Beverungen stated that as a result of the protestant's testimony, and his interpretation, that no relief is necessary to locate the garage within this recorded setback area. He also stated that there is nothing the September 13, 2012 order that would preclude you from locating the garage within this area.

The office would respectfully disagree with Mr. Beverungen and in the absence of an order specifically granting relief from the recorded setback line, we would preclude you from building in that location. We believe that the house orientation and lot layout is unique, however, placing an accessory building in front of the recorded street front setback line is a dangerous precedent we cannot condone.

Very Truly Yours,

A handwritten signature in black ink, appearing to read "W. Carl Richards".

W. Carl Richards, Zoning Supervisor  
Permits, Approvals & Inspections

WCR/kl

CC: Arnold Jablon, Director, PAI  
Howard Alderman, Jr., 502 Washington Avenue, 8<sup>th</sup> Fl, Towson 21204  
Francis Borgerding, Jr., 409 Washington Avenue, Ste. 600, Towson 21204

Zoning Review | County Office Building

111 West Chesapeake Avenue, Room 111 | Towson, Maryland 21204 | Phone 410-887-3391 | Fax 410-887-3048

[www.baltimorecountymd.gov](http://www.baltimorecountymd.gov)

RECONSIDERATION  
EXHIBIT

R-3

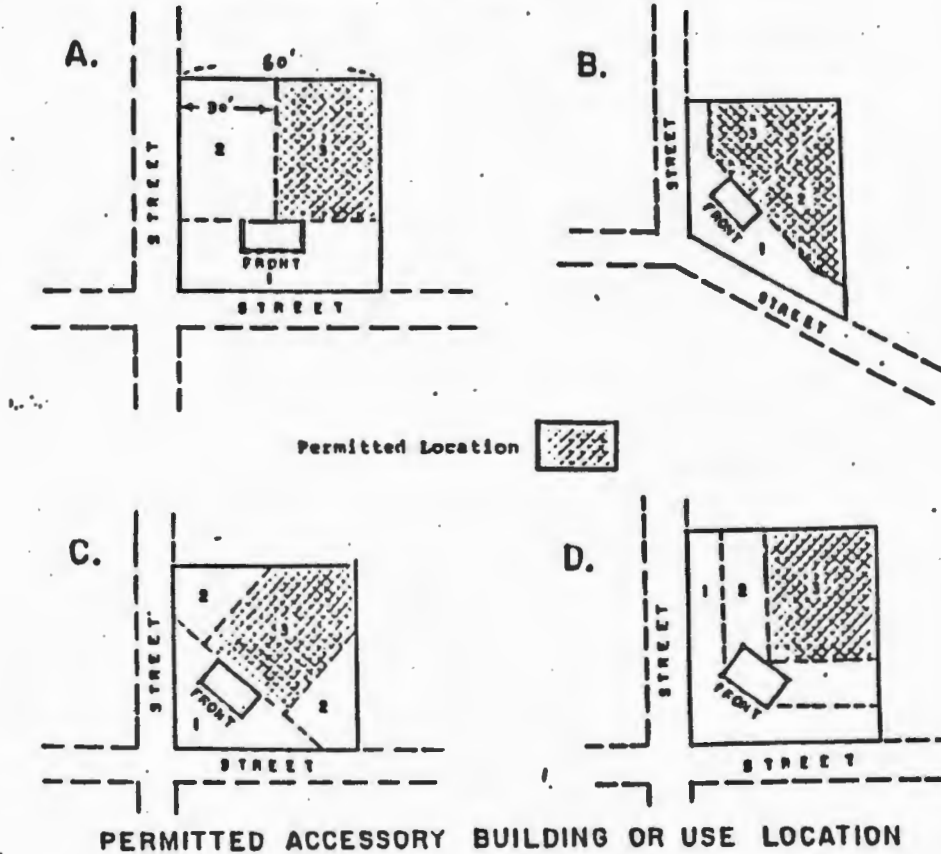


ZONING COMMISSIONER'S POLICY MANUAL

SECTION

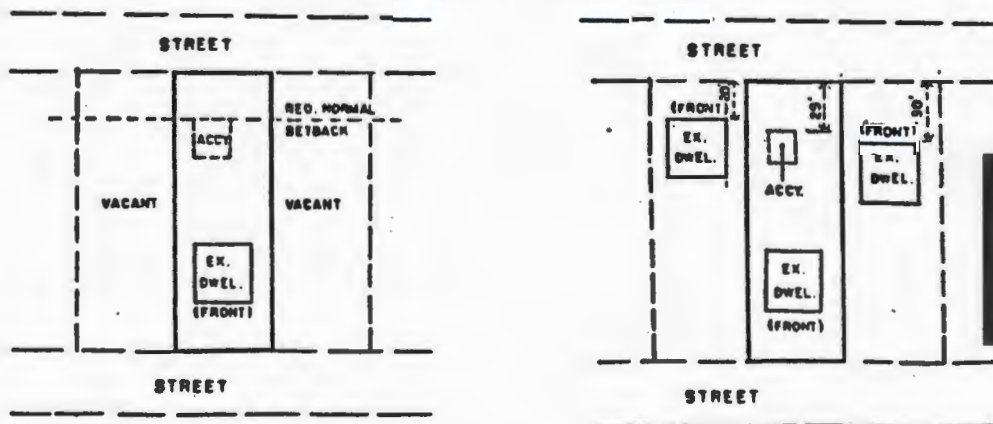
400.1.d ACCESSORY STRUCTURES/USES

(1) Corner Lots - Location Diagrams:



(2) Double Frontage Lots

- (A) Accessory structures/uses on double-frontage lots shall not be closer to a street right-of-way line than the setback required for a principal dwelling.
- (B) Where street setbacks have been established by existing dwellings on adjoining properties, Section 303.1 shall be utilized to determine the average setback.



RECONSIDERATION  
EXHIBIT

R-4



KEVIN KAMENETZ  
County Executive

ARNOLD JABLON  
Deputy Administrative Officer  
Director, Department of Permits,  
Approvals & Inspections

October 3, 2012

Henry A. & Pamela Knott  
1005 Rolandvue Road  
Towson, MD 21204

Re: Zoning Variance Case #2013-0002-A, 1005 Rolandvue Road

Dear Mr. & Mrs. Knott:

I have received a copy of a letter from John E. Beverungen, ALJ, regarding the above referenced case and the placement of a garage within the recorded front street setback area of your lot within your subdivision. Mr. Beverungen stated that as a result of the protestant's testimony, and his interpretation, that no relief is necessary to locate the garage within this recorded setback area. He also stated that there is nothing the September 13, 2012 order that would preclude you from locating the garage within this area.

The office would respectfully disagree with Mr. Beverungen and in the absence of an order specifically granting relief from the recorded setback line, we would preclude you from building in that location. We believe that the house orientation and lot layout is unique, however, placing an accessory building in front of the recorded street front setback line is a dangerous precedent we cannot condone.

Very Truly Yours,

A handwritten signature in black ink, appearing to read "W. Carl Richards".

W. Carl Richards, Zoning Supervisor  
Permits, Approvals & Inspections

WCR/kl

CC: Arnold Jablon, Director, PAI  
Howard Alderman, Jr., 502 Washington Avenue, 8<sup>th</sup> Fl, Towson 21204  
Francis Borgerding, Jr., 409 Washington Avenue, Ste. 600, Towson 21204





KEVIN KAMENETZ  
County Executive

October 1, 2012

LAWRENCE M. STAHL  
Managing Administrative Law Judge  
JOHN E. BEVERUNGEN  
TIMOTHY M. KOTROCO  
Administrative Law Judges

Henry A. and Pamela B. Knott  
1005 Rolandvue Road  
Towson, Maryland 21204

Re: Petition for Administrative Variance  
Case No. 2013-0002-A / 1005 Rolandvue Road

Dear Mr. and Mrs. Knott:

I am in receipt of your letter dated September 26, 2012 regarding the above case. You have indicated that Mr. Richards requested written clarification from me concerning the construction of a garage along Rolandvue Road, which is actually the rear yard of your home.

As you will recall from the hearing, it was the Protestants (and their counsel) who suggested the garage be located in this area. Photographs were submitted (Protestants Exhibits 2 and 3) showing the area in question, and the Protestants indicated they would not object to the structure being positioned in that location. There is also nothing in the September 13, 2012 Order that would preclude you from locating the garage in this location.

The issue of the 50' setback arose when Mr. Kellman opined you had a "double frontage" lot, and would need to satisfy the 50' principal structure setback as a result. I do not agree this is a double frontage lot because it does not front onto two streets, as shown as page 4-1.1 of the Zoning Commissioner's Policy Manual (ZCPM). I am of the opinion the garage can be located in your rear yard provided you observe the requirements of Baltimore County Zoning Regulations (B.C.Z.R.) § 400, which provides (among other things) that such accessory buildings must be located at least 2 ½ feet from side and rear lot lines.

The final issue in your letter concerned the fact that your lot is included within a recorded subdivision. That is of course correct, and Petitioners' Exhibit 2 was a copy of the Rolandvue Plat, and your residence is shown as Lot 6 thereon. The Plat shows a 50' minimum building setback that I believe applies to the principal structure, and you have complied with this requirement, as shown on the zoning plan admitted as Petitioners' Exhibit 3. As noted above, I believe that accessory structures (i.e., a garage) would need to comply with B.C.Z.R. § 400 rather than the 50' setback shown on the plat.

Sincerely,

A handwritten signature in dark ink, appearing to read "JEB", is written over the typed name.

JOHN E. BEVERUNGEN  
Administrative Law Judge  
for Baltimore County

JEB:dlw

c: Howard L. Alderman, Jr., Esquire, Levin & Gann, P.A., Nottingham Centre, 8<sup>th</sup> Floor,  
502 Washington Avenue, Towson, MD 21204  
Francis X. Borgerding, Esquire, 409 Washington Avenue, Suite 600,  
Towson, MD 21204  
W. Carl Richards, Jr., Supervisor, Zoning Review Office, PAI

Henry and Pamela Knott  
1005 Rolandvue Road  
Towson, Maryland 21204

JB 9-7-12  
Denied  
9-13-12

September 26, 2012

RECEIVED

SEP 27 2012

OFFICE OF ADMINISTRATIVE HEARINGS

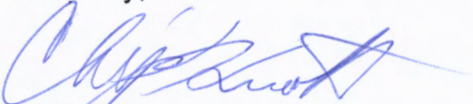
John E. Beverungen  
Administrative Law judge of Baltimore County  
105 West Chesapeake Ave., Suite 103  
Towson, Maryland 21204

Dear Mr. Beverungen,

We met with Mr. Carl Richards of the Baltimore County Zoning Office this morning. After reviewing your ruling, Mr. Richards stated that he will not "sign off" on locating a garage structure anywhere within the 50 foot street setback line along Rolandvue Road without further written clarification from you. He further stated that our residence is within a recorded subdivision (Plat #2 Rolandvue OTG 32 Folio 89) which also may restrict the proposed garage location within the 50 foot street setback of Rolandvue Road.

We are again grateful to you for your time and consideration of this matter.

Sincerely,



Chip and Pam Knott

Cc: Howard L. Alderman, Jr., Esquire  
Francis X. Borgerding, Jr., Esquire  
409 Washington Avenue, Suite 600  
Towson, MD 212104

JB 9/7  
10 AM

Case No.: 2013-0002-A

Exhibit Sheet

Petitioner/Developer

Protestants

10-12-12  
11-7-12

|        |                                         |                                        |
|--------|-----------------------------------------|----------------------------------------|
| No. 1  | Kellman CV                              | Photo of Fox family Garage             |
| No. 2  | Rolandue Plat                           | Color Photo - Side Yard                |
| No. 3  | Site Plan                               | Color Photo - Side Yard                |
| No. 4  | My Neighborhood Map                     | Deed                                   |
| No. 5  | 5A-J<br>Color Photos                    | Photo of Front Door @<br>923 Rolandue. |
| No. 6  | Topo Map County GIS                     | Photo of Common Driveway               |
| No. 7  | Aerial Showing Contour Lines            | Rolandue Plot                          |
| No. 8  | Drawings of Proposed Garage - 8A+8B     | 9-5-12 Letter - J. Wolf                |
| No. 9  | 9-6-12 letters from Butchok + Caldronay | Color Photos 9A, 9B, 9C                |
| No. 10 |                                         |                                        |
| No. 11 |                                         |                                        |
| No. 12 |                                         |                                        |



# Deed

**This Deed**, made this 25th day of October in the year Two Thousand and Four by and between Robin S. Higgins, Grantor, and Henry A. Knott and Pamela B. Knott, his wife, grantees.

**Witnesseth:** that the grantor for the sum of Seven Hundred and Thirty-Five Thousand Dollars (\$735,000.00) and other good and valuable consideration, the receipt whereof is hereby acknowledged, the said grantor, does hereby grant and convey unto the said Grantees, as Tenants by the Entireties, the survivor of them, their Personal Representatives and Assigns, in Fee Simple, all that lot of ground situate in Baltimore County, State of Maryland, and described as follows:

**BEING KNOWN AND DESIGNATED** as Lot Number 6 on a Plat entitled, "Plat Number 2 Rolandvue", which Plat is recorded among the Land Records of Baltimore County in Plat Book OTG Number 32, folio 89.

The improvements thereon being commonly known as 1005 Rolandvue Road, Baltimore (Baltimore County) Maryland 21204.

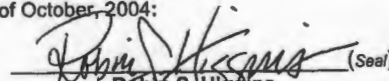
**TOGETHER** with all improvements thereon and the rights, alleys, ways, waters, privileges, appurtenances, and advantages to the same belonging or anyway appertaining.

**BEING** the same lot of ground and premises which by Deed dated December 20, 1997, and recorded among the Land Records of Baltimore County in Liber 12587, folio 113 was granted and conveyed by Robin S. Higgins unto Robin S. Higgins, Life Tenant with full powers.

**To Have and To Hold** the said lot of ground and premises, above described and mentioned and hereby intended to be conveyed; together with the rights, privileges, appurtenances and advantages thereto belonging or appertaining unto and to the proper use and benefit of said Grantees as Tenants by the Entireties, the survivor of them, their respective personal representatives, heirs and assigns, in Fee Simple.

**And** the said Grantor hereby covenants that she has not done, or suffered to be done, any act, matter or thing whatsoever, to encumber the property hereby conveyed; that she will warrant specially the property hereby granted and that she will execute such further assurances of the same as may be requisite.

**Witness** the hand and seal of said Grantor this 25<sup>th</sup> of October, 2004:

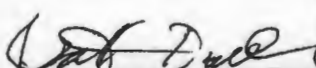
  
Robin S. Higgins (Seal)

STATE of MARYLAND }  
COUNTY of BALTIMORE } to wit

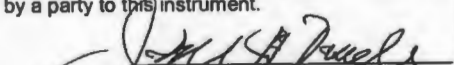
I HEREBY CERTIFY that on this 25<sup>th</sup> day of October, 2004 before me, the subscriber, a Notary Public of the State of Maryland, County of Baltimore, personally appeared Robin S. Higgins, Grantor, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged the foregoing deed to be her act and, in my presence, signed and sealed the same.

My commission expires: August 1, 2008



  
JOHN H. DUMLER, Notary Public

**THIS IS TO CERTIFY** that the within instrument has been prepared (i) by or under the supervision of the undersigned Maryland attorney or (ii) by a party to this instrument.

  
JOHN H. DUMLER, Attorney-at-Law  
8441 Belair Road, Suite 202  
Baltimore, Maryland 21236  
410-258-3000

PROTESTANT'S

EXHIBIT NO. 4

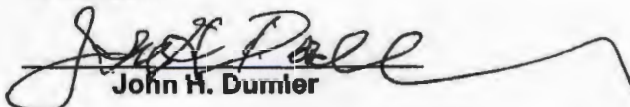
**Affidavit of Principle Residence**  
**MADE PURSUANT TO TAX-PROPERTY ARTICLE, SECTION 13-203(B)**  
**ANNOTATED CODE OF THE STATE OF MARYLAND**

The Purchasers of the property known as:

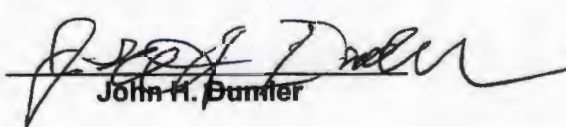
1005 Rolandvue Avenue  
 Baltimore, Maryland 21204-6816

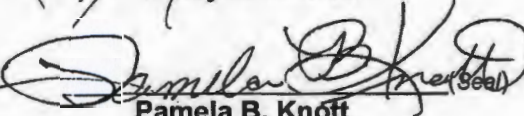
hereby states and declares that they will occupy said property in a manner consistent with the terms set forth in Tax-Property Article 13-203(b) of the Annotated Code of the State of Maryland and, pursuant to said Article, claim exemption from payment of Maryland State Transfer Tax on the first \$30,000.00 of the total consideration paid by them for said property.

**Witness:**

  
 John H. Dumler

 (Seal)  
 Henry A. Knott

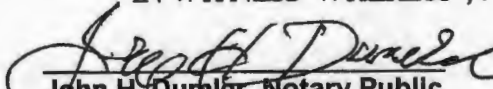
  
 John H. Dumler

 (Seal)  
 Pamela B. Knott

STATE of MARYLAND    }  
                                   } to wit  
 COUNTY of BALTIMORE }

I, **HEREBY CERTIFY**, that on this 25<sup>th</sup> day of October, 2004 before me, the subscriber, a Notary Public of the State aforesaid, personally appeared, Henry A. Knott and Pamela B. Knott, his wife, whose names are subscribed to the within instrument, and acknowledge the foregoing Affidavit to be their act, and in my presence signed and sealed same.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

  
 John H. Dumler, Notary Public

My Commission Expires: August 1, 2008





00209831 621

**Certification of Exemption from Withholding Upon Disposition  
of Maryland Real Estate*****Affidavit of Residence or Principal Residence***

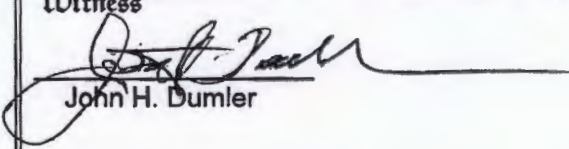
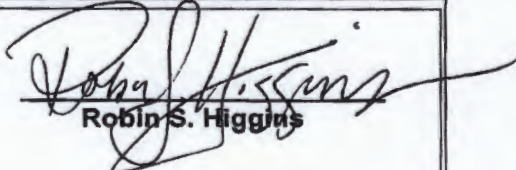
Based on the certification, below, Transferor claims exemption from the tax withholding requirements of §10-912 of the Tax-General Article, Annotated Code of Maryland. Section 10-912 provides that certain tax payments must be withheld and paid when a deed or other instrument that affects a change in ownership of real property is presented for recordation. The requirements of §10-912 do not apply when a transferor provides a certification of Maryland residence or certification that the transferred property is the transferor's principal residence.

| 1. Transferor Information                      |  |
|------------------------------------------------|--|
| Name of Transferors<br><b>Robin S. Higgins</b> |  |

| 2. Reasons for Exemption |                                                                                                                                                                                                                                                                                                                                  |
|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Resident Status          | <input checked="" type="checkbox"/> I, Transferor, am a resident of the State of Maryland.<br><br>Transferor is a resident entity under §10-912(A)(4) of the Tax-General Article of the Annotated Code of Maryland, I am an agent of the Transferor, and I have the authority to sign this document on behalf of the Transferor. |
| Principal Residence      | Although I am no longer a resident of the State of Maryland, the the Property is my principal residence as defined in IRC §121.                                                                                                                                                                                                  |

**Under penalty of perjury, I certify that I have examined this declaration and that, to the best of my knowledge, it is true, correct and complete.**

| 3a. Individual Transferors                                                                                       |                                                                                                          |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|
| Witness<br><br>John H. Dumler | <br>Robin S. Higgins |

| 3b. Entity                                    |                             |
|-----------------------------------------------|-----------------------------|
| Witness Attest<br><br>_____<br>John H. Dumler | Transferor<br><br>By: _____ |



00209831 b22

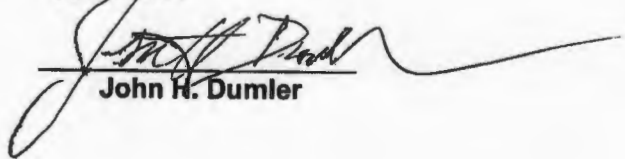
***Affidavit as to Total Payment***

The undersigned hereby certifies under penalties of perjury, that the following is true to the best of my knowledge, information and belief, in accordance with Section 10-912 of the Tax-General Article of the Annotated Code of Maryland, (the "Withholding Law"):

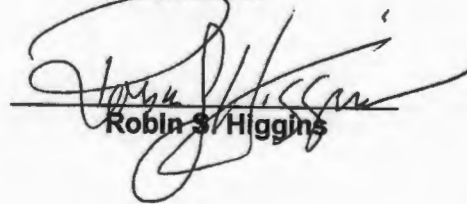
1. That I am the Transferor *[or agent of the Transferor(s) if so indicated]* of that real property described in the accompanying deed.
2. The amount of total payment for the purpose of the "Withholding Law" is:  
\$735,000.00

Dated this 25<sup>th</sup> of October, 2004

Witness:

  
John H. Dumler

Transferor

  
Robin S. Higgins

RETURN TO: 0020983, 622  
Law Office John H. Dumler  
8441 Belair Rd., Suite 202  
Baltimore, Maryland 21236

State of Maryland Land Instrument  
☐ Baltimore City ☒ County: BALTIMORE

Information provided is for the use of the Clerk's Office, State Department of Assessments and Taxation, and County Finance Office Only.

(Type or Print in Black Ink Only—All Copies Must Be Legible)

|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              |                                            |                                                          |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------|----------------------------------------------------------|
| Type(s)<br>of Instruments                                                                                                                                                                                                                       | <input type="checkbox"/> Check Box if Addendum Intake Forms Attached:                                                                                            |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> Deed                                                                                                                         | <input type="checkbox"/> Mortgage                            | <input type="checkbox"/> Other             | <input type="checkbox"/> Other                           |
| Conveyance Type<br>Check Box                                                                                                                                                                                                                    | <input checked="" type="checkbox"/> Deed of Trust                                                                                                                | <input type="checkbox"/> Lease                               |                                            |                                                          |
|                                                                                                                                                                                                                                                 | <input type="checkbox"/> Improved Sale                                                                                                                           | <input type="checkbox"/> Unimproved Sale                     | <input type="checkbox"/> Multiple Accounts | <input type="checkbox"/> Not an Arms-<br>Length Sale [9] |
| Tax Exemptions<br>(If Applicable)                                                                                                                                                                                                               | Recordation                                                                                                                                                      |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | State Transfer                                                                                                                                                   |                                                              |                                            |                                                          |
| Cite or Explain Authority                                                                                                                                                                                                                       | County Transfer                                                                                                                                                  |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              |                                            |                                                          |
| Consideration<br>and Tax<br>Calculations                                                                                                                                                                                                        | Consideration Amount                                                                                                                                             |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Purchase Price/Consideration                                                                                                                                     | \$ 735,000.00                                                |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Any New Mortgage                                                                                                                                                 | \$ 654,000.00                                                |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Balance of Existing Mortgage                                                                                                                                     | \$                                                           |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Other:                                                                                                                                                           | \$                                                           |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Other:                                                                                                                                                           | \$                                                           |                                            |                                                          |
| Fees                                                                                                                                                                                                                                            | Full Cash Value                                                                                                                                                  | \$ 735,000.00                                                |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Recording Charge                                                                                                                                                 | \$ 20.00                                                     | \$ 20.00                                   |                                                          |
|                                                                                                                                                                                                                                                 | Surcharge                                                                                                                                                        | \$ 20.00                                                     | \$ 20.00                                   |                                                          |
|                                                                                                                                                                                                                                                 | State Recordation Tax                                                                                                                                            | \$ 3675.00                                                   | \$                                         |                                                          |
|                                                                                                                                                                                                                                                 | State Transfer Tax                                                                                                                                               | \$ 3675.00                                                   | \$                                         |                                                          |
|                                                                                                                                                                                                                                                 | County Transfer Tax                                                                                                                                              | \$ 10,695.00                                                 | \$                                         |                                                          |
| Description of<br>Property<br>SDAT requires<br>submission of all<br>applicable information.<br>A maximum of 40<br>characters will be<br>indexed in accordance<br>with the priority cited in<br>Real Property Article<br>Section 3-104(g)(3)(i). | Other:                                                                                                                                                           | \$                                                           |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Other:                                                                                                                                                           | \$                                                           |                                            |                                                          |
|                                                                                                                                                                                                                                                 | District                                                                                                                                                         | Property No.                                                 | Owner's Name                               | Map                                                      |
|                                                                                                                                                                                                                                                 | 09                                                                                                                                                               | 0904003496                                                   | 12587/113                                  | 69                                                       |
|                                                                                                                                                                                                                                                 | Subdivision Name                                                                                                                                                 | Block                                                        | Lot                                        | Section                                                  |
|                                                                                                                                                                                                                                                 | 6                                                                                                                                                                |                                                              |                                            | 977                                                      |
| Transferred<br>From                                                                                                                                                                                                                             | Each an Address of Property Being Conveyed                                                                                                                       |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | 1005 ROLANDVUE AV. BALTIMORE MD 21204-6816                                                                                                                       |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Official Property Identifiers (if applicable)                                                                                                                    |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Residential <input type="checkbox"/> Non-Residential <input type="checkbox"/> Fee Simple <input type="checkbox"/> or Ground Rent <input type="checkbox"/> Amount |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Partial Conveyance <input type="checkbox"/> Yes <input type="checkbox"/> No Description/Amt. of SqFt/Acreage Transferred:                                        |                                                              |                                            |                                                          |
| Transferred<br>To                                                                                                                                                                                                                               | If Partial Conveyance, List Improvements Conveyed:                                                                                                               |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Grantor's Name                                                                                                                                                   |                                                              | Grantee's Name                             |                                                          |
|                                                                                                                                                                                                                                                 | ROBIN S. HIGGINS                                                                                                                                                 |                                                              | HENRY A. KNOTT, 2nd                        |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              | PAMELA B. KNOTT                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              |                                            |                                                          |
| Other Names<br>to Be Indexed                                                                                                                                                                                                                    | New Owner's Name, Mailing Address:                                                                                                                               |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | 1005 ROLANDVUE AV BALTIMORE MD 21204-6816                                                                                                                        |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Additional Names to be Indexed (Optional)                                                                                                                        |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Additional Names to be Indexed (Optional)                                                                                                                        |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  |                                                              |                                            |                                                          |
| Contact/Mail<br>Information                                                                                                                                                                                                                     | Instrument Submitted By or Contact Person                                                                                                                        |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Name:                                                                                                                                                            |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Firm:                                                                                                                                                            | Law Office John H. Dumler                                    |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Address:                                                                                                                                                         | 8441 Belair Road, Suite 202                                  |                                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  | Baltimore, Maryland 21236 (410) 256-3000                     |                                            |                                                          |
|                                                                                                                                                                                                                                                 |                                                                                                                                                                  | <input checked="" type="checkbox"/> Return to Contact Person |                                            |                                                          |
| Assessment<br>Information                                                                                                                                                                                                                       | <input type="checkbox"/> Hold for Pickup                                                                                                                         |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> Return Address Provided                                                                                                      |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | Assessment Information                                                                                                                                           |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Will the property being conveyed be the grantee's principal residence?                       |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Does transfer include personal property? If yes, identify: _____                             |                                                              |                                            |                                                          |
|                                                                                                                                                                                                                                                 | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Was property surveyed? If yes, attach copy of survey (if recorded, no copy required).        |                                                              |                                            |                                                          |

PAID RECEIPT  
BALTIMORE COUNTY CLERK  
OFFICE OF THE CLERK  
RECORDATION TAXES  
\$14,370.00  
COUNTY, Maryland  
CA \$1.00

Law Office John H. Dumler (410) 256-3000  
JHD File Number 0410-043  
Check Numbers 10963 10964 10965





Item #0002  
Environmental Map

Created By  
Baltimore County  
My Neighborhood



This data is only for general information purposes only. This data may be inaccurate or contain errors or omissions. Baltimore County, Maryland does not warrant the accuracy or reliability of the data and disclaims all warranties with regard to the data, including but not limited to, all warranties, express or implied, of merchantability and fitness for any particular purpose. Baltimore County, Maryland disclaims all obligation and liability for damages, including but not limited to, actual, special, indirect, and consequential damages, attorneys' and experts' fees, and court costs incurred as a result of, arising from or in connection with the use of or reliance upon this data.

Printed 6/7/2012



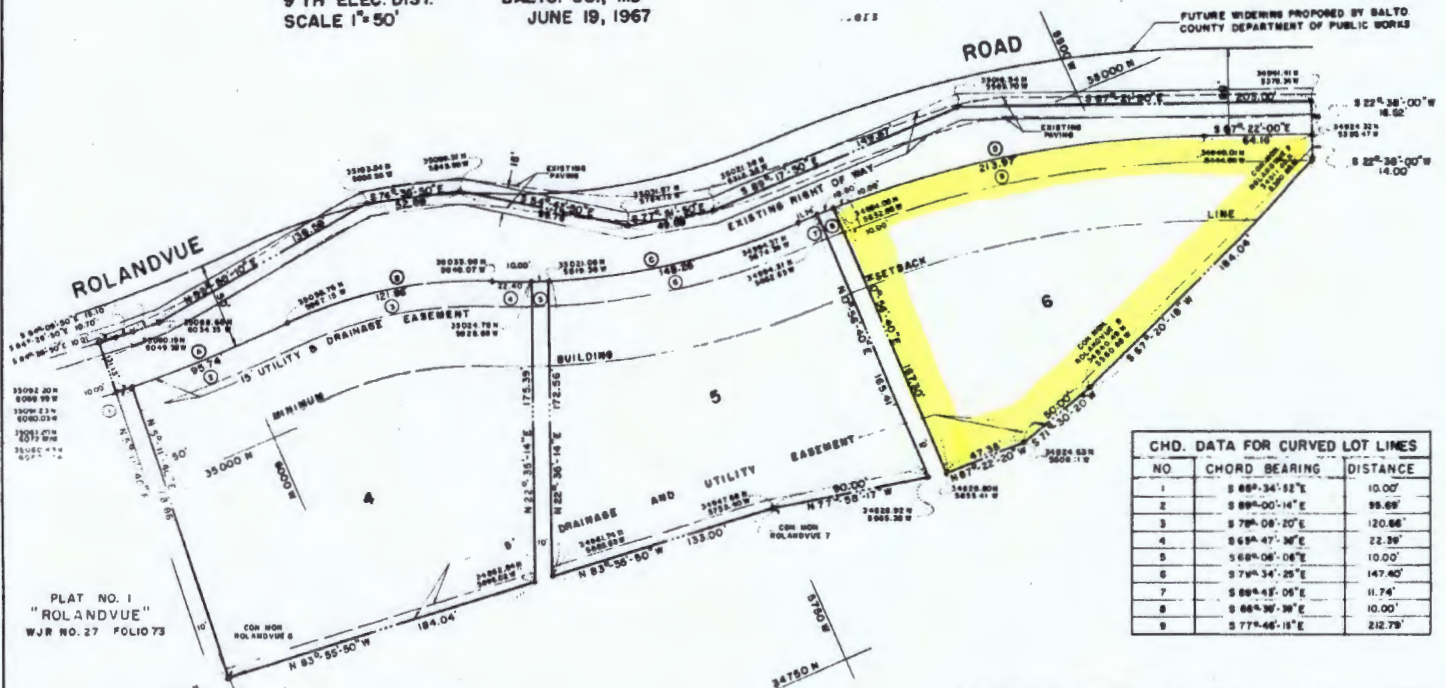
PLAT NO. 2  
"ROLANDVUE"

OWNED AND DEVELOPED  
BY  
HERBERT M. BRUNE, JR. &  
ELAINE M. BRUNE  
1225 MATHIESON BLDG.  
BALTO.-2, MD.

012 32 FOLD 89

THIS PHOTO TAKEN FROM THE  
RECORDS OF THE CIRCUIT  
COURT FOR BALTIMORE  
COUNTY IS FOR OFFICIAL  
USE ONLY AND NOT TO BE  
DUPLICATED FOR SALE OR  
GIFT.

9 TH ELEC. DIST. BALTO. CO., MD  
SCALE 1"=50' JUNE 19, 1967



| CHD. DATA FOR CURVED LOT LINES |                |          |
|--------------------------------|----------------|----------|
| NO                             | CHORD BEARING  | DISTANCE |
| 1                              | S 88°-34'-52"E | 10.00'   |
| 2                              | S 89°-00'-14"E | 95.65'   |
| 3                              | S 79°-08'-20"E | 120.86'  |
| 4                              | S 69°-47'-30"E | 22.39'   |
| 5                              | S 68°-08'-08"E | 10.00'   |
| 6                              | S 74°-34'-25"E | 147.40'  |
| 7                              | S 88°-45'-05"E | 11.74'   |
| 8                              | S 86°-30'-30"E | 10.00'   |
| 9                              | S 77°-46'-15"E | 212.79'  |

| CURVE DATA FOR ROAD ALIGNMENT |         |         |             |         |                |         |
|-------------------------------|---------|---------|-------------|---------|----------------|---------|
| NO                            | RADIUS  | ARC (L) | Δ           | TAN.    | L.C.B.         | CHORD   |
| A                             | 889.00' |         |             |         |                |         |
| B                             | 250.00' | 121.88' | 27°-55'-40" | 62.16'  | S 79°-08'-20"E | 120.86' |
| C                             | 396.36' | 160.86' | 26°-08'-50" | 81.93'  | S 77°-15'-55"E | 178.11' |
| D                             | 589.17' | 235.71' | 22°-55'-20" | 119.45' | S 78°-45'-40"E | 234.14' |

1) THE STREETS AND/OR ROADS AS SHOWN HEREON AND MENTION THEREOF IN DEEDS ARE FOR THE PURPOSE OF DESCRIPTION ONLY AND THE SAME ARE NOT INTENDED TO BE DEDICATED TO PUBLIC USE. THE FEE SIMPLE TITLE THEREOF IS EXPRESSLY RESERVED IN THE GRANTORS OF THE DEED TO WHICH THIS PLAT IS ATTACHED, THEIR HEIRS AND ASSIGNS.

2) THE BEARINGS AND COORDINATES SHOWN HEREON ARE REFERRED TO THE TRUE MERIDIAN AND COORDINATE SYSTEM OF THE BALTO. COUNTY METROPOLITAN DISTRICT AS ESTABLISHED IN THIS AREA BY NET DIST. HUBS NOS. X-4361 AND X-4367 AS LOCATED AND VALUED FEBRUARY, 1960.

I HEREBY CERTIFY THAT THE REQUIREMENTS AS SET FORTH IN SECTIONS 78A, 78B, 78C, AND 78D OF ARTICLE 17 OF THE ANNOTATED CODE OF MARYLAND (1939 EDITION) TITLE "CLERKS OF COURTS" AS FAR AS IT CONCERNS THE MAKING OF THIS PLAT & SETTING OF THE MARKERS, HAVE BEEN COMPLIED WITH.

SIGNED: Leo W. Rader  
REGISTERED LAND SURVEYOR NO. 1025

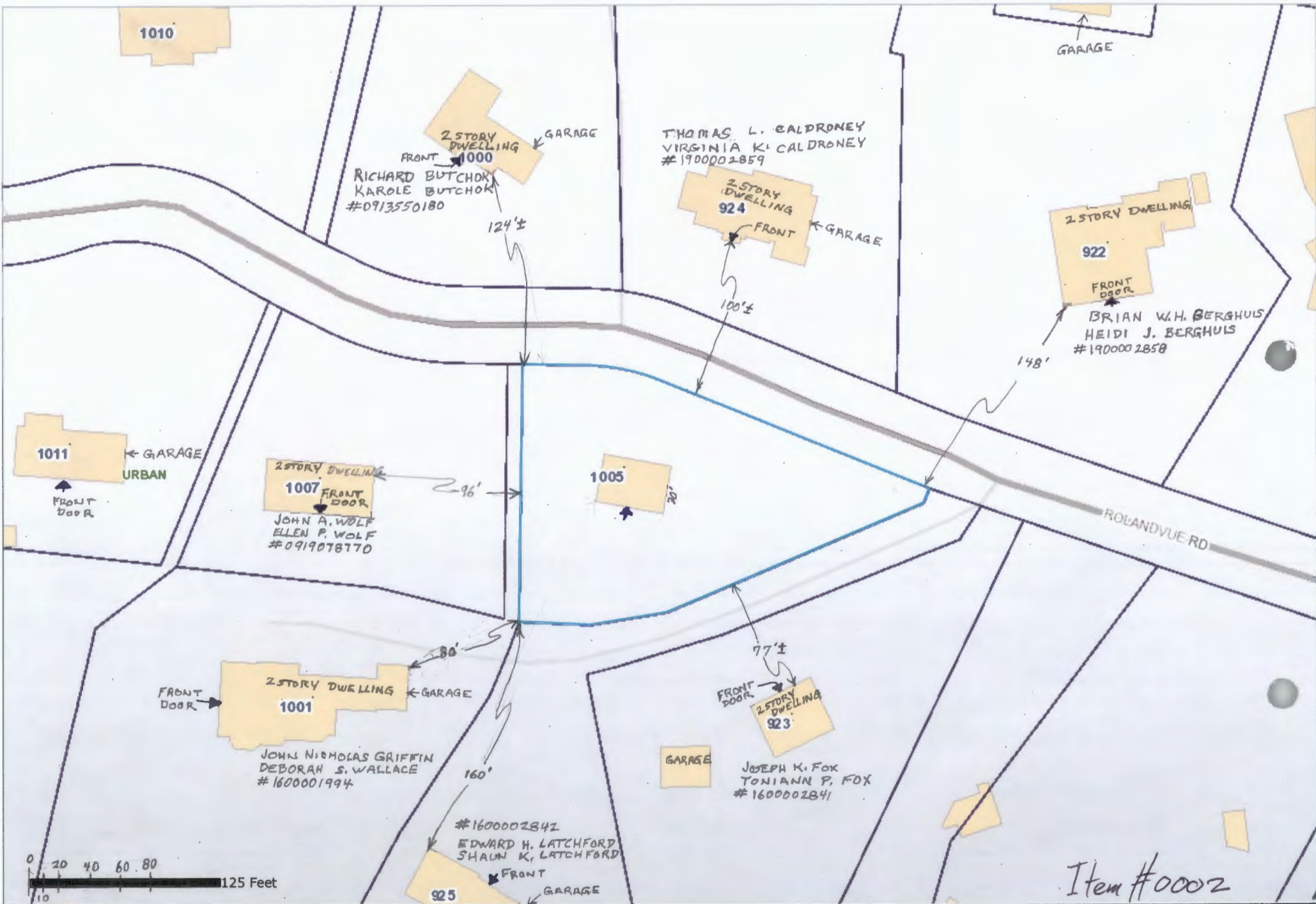
APPROVED FOR BALTIMORE COUNTY HEALTH DEPARTMENT  
BY  
Ronald D. King, M.D. DATE 11/20/67  
DEPUTY STATE AND COUNTY HEALTH OFFICER

APPROVED FOR BALTIMORE COUNTY PLANNING BOARD  
BY  
George E. Gavelis DATE 11/21/67  
DIRECTOR

HIGHWAY DEPARTMENT OF BALTIMORE COUNTY- APPROVED  
FOR STREET ALIGNMENT AND LOCATION  
BY  
Anthony J. Moring DATE 11/16/67  
Hwy. Engineer

LEO W. RADER  
REGISTERED LAND SURVEYOR  
38 BELFAST ROAD  
BALTIMORE, MD. CL. X-2282

Item #0002



Land Development Map

Created By  
Baltimore County  
My Neighborhood



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Printed 6/7/2012



C H E C K L I S TComment  
ReceivedDepartmentSupport/Oppose/  
Conditions/  
Comments/  
No Comment7-19DEVELOPMENT PLANS REVIEW  
(if not received, date e-mail sent \_\_\_\_\_)NCCBSA  
NoDEPS  
(if not received, date e-mail sent \_\_\_\_\_)

FIRE DEPARTMENT

PLANNING  
(if not received, date e-mail sent \_\_\_\_\_)7-16

STATE HIGHWAY ADMINISTRATION

No objection

TRAFFIC ENGINEERING

COMMUNITY ASSOCIATION

ADJACENT PROPERTY OWNERS

ZONING VIOLATION (Case No. \_\_\_\_\_)

PRIOR ZONING (Case No. \_\_\_\_\_)

NEWSPAPER ADVERTISEMENT Date: 8-16-12SIGN POSTING Date: 8-17-12 by O'Keefe  
21 daysPEOPLE'S COUNSEL APPEARANCE Yes ☐ No ☐PEOPLE'S COUNSEL COMMENT LETTER Yes ☐ No ☐

Comments, if any:

(Formal Demand 8/2 - Joseph K. Fox)

Maryland Department of Assessments and Taxation  
Real Property Data Search (vw3.1A)  
BALTIMORE COUNTY

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[Redemption](#)  
[GroundRent](#)  
[Registration](#)

**Account Identifier:**

District - 09 Account Number - 0904003496

**Owner Information**

**Owner Name:** KNOTT HENRY A  
KNOTT PAMELA B  
**Use:** RESIDENTIAL  
**Principal Residence:** YES  
**Mailing Address:** 1005 ROLANDVUE AV  
BALTIMORE MD 21204-6816  
**Deed Reference:** 1) /20983/ 00619  
2)

**Location & Structure Information****Premises Address**

1005 ROLANDVUE AVE  
0-0000

**Legal Description**

1005 ROLANDVUE AVE  
ROLANDVUE

| Map  | Grid | Parcel | Sub District | Subdivision | Section | Block | Lot | Assessment Area | Plat No:  | 2         |
|------|------|--------|--------------|-------------|---------|-------|-----|-----------------|-----------|-----------|
| 0069 | 0017 | 0977   |              | 0000        |         |       | 6   | 2               | Plat Ref: | 0032/0089 |

**Special Tax Areas**  
**Town** NONE  
**Ad Valorem**  
**Tax Class**

| Primary Structure Built | Enclosed Area | Property Land Area | County Use |
|-------------------------|---------------|--------------------|------------|
| 1974                    | 2,728 SF      | 27,442 SF          | 04         |

| Stories  | Basement | Type          | Exterior |
|----------|----------|---------------|----------|
| 2.000000 | YES      | STANDARD UNIT | FRAME    |

**Value Information**

|                    | Base Value | Value      | Phase-in Assessments |            |
|--------------------|------------|------------|----------------------|------------|
|                    |            | As Of      | As Of                | As Of      |
|                    |            | 01/01/2011 | 07/01/2011           | 07/01/2012 |
| Land               | 328,860    | 328,800    |                      |            |
| Improvements:      | 410,240    | 276,300    |                      |            |
| Total:             | 739,100    | 605,100    | 605,100              | 605,100    |
| Preferential Land: | 0          |            |                      | 0          |

**Transfer Information**

| Seller:                     | Date:                | Price:     |
|-----------------------------|----------------------|------------|
| HIGGINS ROBIN S             | 11/15/2004           | \$735,000  |
| Type: ARMS LENGTH IMPROVED  | Deed1: /20983/ 00619 | Deed2:     |
| Seller: HIGGINS ROBIN S     | Date: 01/06/1998     | Price: \$0 |
| Type: NON-ARMS LENGTH OTHER | Deed1: /12587/ 00113 | Deed2:     |
| Seller: HIGGINS PETER J     | Date: 11/17/1997     | Price: \$0 |
| Type: NON-ARMS LENGTH OTHER | Deed1: /12498/ 00554 | Deed2:     |

**Exemption Information**

| Partial Exempt Assessments | Class | 07/01/2011 | 07/01/2012 |
|----------------------------|-------|------------|------------|
| County                     | 000   | 0.00       |            |
| State                      | 000   | 0.00       |            |
| Municipal                  | 000   | 0.00       | 0.00       |

**Tax Exempt:****Special Tax Recapture:****Exempt Class:**

NONE

**Homestead Application Information****Homestead Application Status:**

No Application

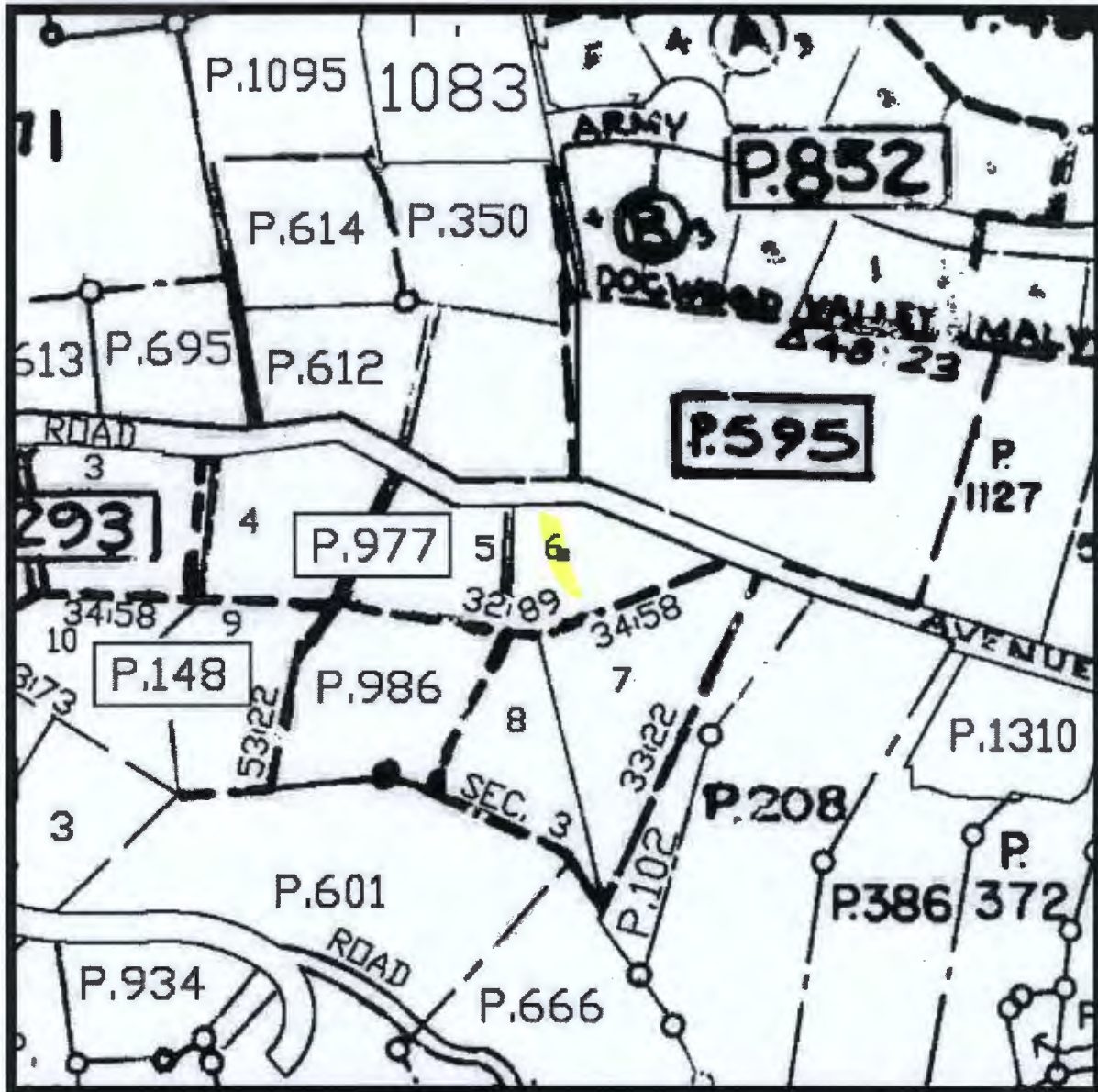




**Maryland Department of Assessments and Taxation**  
**BALTIMORE COUNTY**  
**Real Property Data Search**

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District - 09 Account Number - 0904003496



The information shown on this map has been compiled from deed descriptions and plats and is not a property survey. The map should not be used for legal descriptions. Users noting errors are urged to notify the Maryland Department of Planning Mapping, 301 W. Preston Street, Baltimore MD 21201.

If a plat for a property is needed, contact the local Land Records office where the property is located. Plats are also available online through the Maryland State Archives at [www.plats.net](http://www.plats.net).

Property maps provided courtesy of the Maryland Department of Planning ©2011. For more information on electronic mapping applications, visit the Maryland Department of Planning web site at [www.mdp.state.md.us/OurProducts/OurProducts.shtml](http://www.mdp.state.md.us/OurProducts/OurProducts.shtml)

Maryland Department of Assessments and Taxation  
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[Redemption](#)  
[GroundRent](#)  
[Registration](#)

**Account Identifier:** District - 09 Account Number - 1600002841

**Owner Information**

**Owner Name:** FOX JOSEPH K  
FOX TONIANN E  
**Use:** RESIDENTIAL  
**Principal Residence:** YES  
**Mailing Address:** 923 ROLANDVUE AVE  
BALTIMORE MD 21204-6814  
**Deed Reference:** 1) /25103/ 00508  
2)

**Location & Structure Information**

**Premises Address**  
923 ROLANDVUE AVE  
0-0000  
**Legal Description**  
1.2 AC  
923 ROLANDVUE AVE  
ROLANDVUE

| Map  | Grid | Parcel | Sub District | Subdivision | Section | Block | Lot | Assessment Area | Plat No:            |
|------|------|--------|--------------|-------------|---------|-------|-----|-----------------|---------------------|
| 0069 | 0017 | 0148   |              | 0000        | 3       |       | 7   | 2               |                     |
|      |      |        |              |             |         |       |     |                 | Plat Ref: 0034/0058 |

**Special Tax Areas**  
**Town** NONE  
**Ad Valorem**  
**Tax Class**

| Primary Structure Built | Enclosed Area | Property Land Area | County Use |
|-------------------------|---------------|--------------------|------------|
| 1967                    | 3,285 SF      | 1.2000 AC          | 04         |

| Stories  | Basement | Type                | Exterior |
|----------|----------|---------------------|----------|
| 2.500000 | YES      | STANDARD UNIT FRAME |          |

**Value Information**

|                           | Base Value | Value      | Phase-in Assessments |            |
|---------------------------|------------|------------|----------------------|------------|
|                           |            | As Of      | As Of                | As Of      |
|                           |            | 01/01/2011 | 07/01/2011           | 07/01/2012 |
| <b>Land</b>               | 357,000    | 357,000    |                      |            |
| <b>Improvements:</b>      | 562,460    | 394,000    |                      |            |
| <b>Total:</b>             | 919,460    | 751,000    | 751,000              | 751,000    |
| <b>Preferential Land:</b> | 0          |            |                      | 0          |

**Transfer Information**

|                                   |                             |                         |
|-----------------------------------|-----------------------------|-------------------------|
| <b>Seller:</b> MENENDEZ MARCIO M  | <b>Date:</b> 01/22/2007     | <b>Price:</b> \$975,000 |
| <b>Type:</b> ARMS LENGTH IMPROVED | <b>Deed1:</b> /25103/ 00508 | <b>Deed2:</b>           |
| <b>Seller:</b> COX THOMAS E       | <b>Date:</b> 09/16/1975     | <b>Price:</b> \$150,000 |
| <b>Type:</b> ARMS LENGTH IMPROVED | <b>Deed1:</b> /05566/ 00564 | <b>Deed2:</b>           |
| <b>Seller:</b>                    | <b>Date:</b>                | <b>Price:</b>           |
| <b>Type:</b>                      | <b>Deed1:</b>               | <b>Deed2:</b>           |

**Exemption Information**

| Partial Exempt Assessments | Class | 07/01/2011 | 07/01/2012 |
|----------------------------|-------|------------|------------|
| <b>County</b>              | 000   | 0.00       |            |
| <b>State</b>               | 000   | 0.00       |            |
| <b>Municipal</b>           | 000   | 0.00       | 0.00       |

**Tax Exempt:**  
**Exempt Class:**  
**Special Tax Recapture:** NONE

**Homestead Application Information**

**Homestead Application Status:** No Application

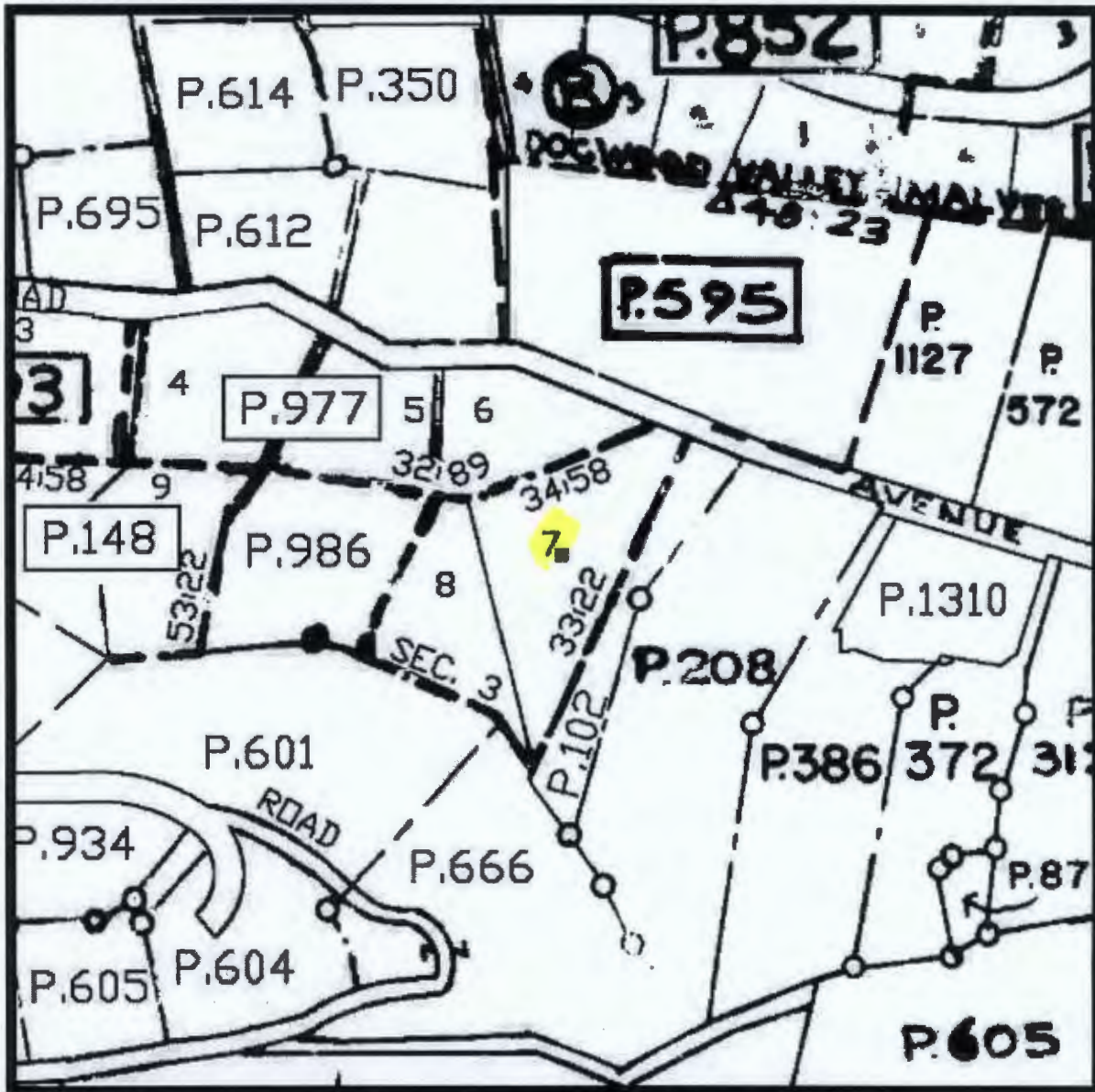




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District - 09 Account Number - 1600002841



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9/7  
11 Am  
205

**Debra Wiley - ZAC Comments - Distribution Mtg. of 7/16**

**From:** Debra Wiley  
**To:** Kennedy, Dennis; Lanham, Lynn; Livingston, Jeffrey; Lykens, David; M...  
**Date:** 7/25/2012 3:51 PM  
**Subject:** ZAC Comments - Distribution Mtg. of 7/16

Good Afternoon,

Please see the cases listed below and the hearing date, if assigned. If you wish to submit a ZAC comment, please be advised that you must do so before the hearing date. If it's not received by the hearing date, it will not be considered in our decision.

2012-0286-A - 2 Adil Court  
No hearing date in data base as of today

2012-0298-A - 25 Offspring Court  
Administrative Variance - Closing Date: 7/30

2012-0329-SPH - 7827 Babikow Road  
No hearing date in data base as of today

2012-0330-A - 2206 A Ridge Road  
Administrative Variance - Closing Date: 7/23

2012-0331-A - 3801 Schnaper Drive  
No hearing date in data base as of today

2012-0332-A - 536 Piccadilly Road  
Administrative Variance - Closing Date: 7/30

2013-0001-A - 2112 Riverview Road  
Administrative Variance - Closing Date: 8/6

2013-0002-A - 1005 Rolandvue Road  
Administrative Variance - Closing Date: 8/6

Formal Denial 8/9

2013-0003-A - 6 Brierleigh Court  
Administrative Variance - Closing Date: 8/6

2013-0004-SPHA - 1236 E. Riverside Road - **CRITICAL AREA**  
No hearing date in data base as of 7/25

Thanks.

Debbie Wiley  
Legal Administrative Secretary  
Office of Administrative Hearings  
105 West Chesapeake Avenue, Suite 103  
Towson, Md. 21204  
410-887-3868  
410-887-3468 (fax)  
dwiley@baltimorecountymd.gov



**Subject:** ZAC Comments - Distribution Mtg. of 7/16  
**Created By:** dwiley@baltimorecountymd.gov  
**Scheduled Date:**  
**Creation Date:** 7/25/2012 3:51 PM  
**From:** Debra Wiley

| Recipient                                                  | Action    | Date & Time       | Comment |
|------------------------------------------------------------|-----------|-------------------|---------|
| To: Curtis Murray (cjmurray@baltimorecountymd.gov)         | Delivered | 7/25/2012 3:51 PM |         |
| To: David Lykens (dlykens@baltimorecountymd.gov)           | Delivered | 7/25/2012 3:51 PM |         |
| To: Dennis Kennedy (DKennedy@baltimorecountymd.gov)        | Delivered | 7/25/2012 3:51 PM |         |
| To: Don Muddiman (dmuddiman@baltimorecountymd.gov)         | Delivered | 7/25/2012 3:51 PM |         |
| To: Jeffrey Livingston (jlivingston@baltimorecountymd.gov) | Delivered | 7/25/2012 3:51 PM |         |
| To: Lynn Lanham (mlanham@baltimorecountymd.gov)            | Delivered | 7/25/2012 3:51 PM |         |



KEVIN KAMENETZ  
County Executive

ARNOLD JABLON  
Deputy Administrative Officer  
Director, Department of Permits,  
Approvals & Inspections

August 29, 2012

Henry A & Pamela B Knott  
1005 Rolandvue Road  
Towson MD 21204

RE: Case Number: 2013-0002 A, Address: 1005 Rolandvue Road, 21204

Dear Mr. & Ms. Knott:

The above referenced petition was accepted for processing **ONLY** by the Bureau of Zoning Review, Department of Permits, Approvals, and Inspection (PAI) on July 9, 2012. This letter is not an approval, but only a **NOTIFICATION**.

The Zoning Advisory Committee (ZAC), which consists of representatives from several approval agencies, has reviewed the plans that were submitted with your petition. All comments submitted thus far from the members of the ZAC are attached. These comments are not intended to indicate the appropriateness of the zoning action requested, but to ensure that all parties (zoning commissioner, attorney, petitioner, etc.) are made aware of plans or problems with regard to the proposed improvements that may have a bearing on this case. All comments will be placed in the permanent case file.

If you need further information or have any questions, please do not hesitate to contact the commenting agency.

Very truly yours,

A handwritten signature in black ink, reading "W. Carl Richards, Jr.", is written over the typed name.

W. Carl Richards, Jr.  
Supervisor, Zoning Review

WCR: jaf

Enclosures

c: People's Counsel



Martin O'Malley, Governor  
Anthony G. Brown, Lt. Governor



Maryland Department of Transportation

Beverley K. Swaim-Staley, Secretary  
Melinda B. Peters, Administrator

Date: 7-16-12

Ms. Kristen Lewis  
Baltimore County Office of  
Permits and Development Management  
County Office Building, Room 109  
Towson, Maryland 21204

RE: Baltimore County  
Item No 2013-0002-A  
Administrative Variance  
Henry A. & Pamela B. Knott  
1005 Roland vue Road

Dear Ms. Lewis:

Thank you for the opportunity to review your referral request on the subject of the above captioned. We have determined that the subject property does not access a State roadway and is not affected by any State Highway Administration projects. Therefore, based upon available information this office has no objection to Baltimore County Zoning Advisory Committee approval of Item No. 2013-0002-A.

Should you have any questions regarding this matter, please contact Richard Zeller at 410-545-5598 or 1-800-876-4742 extension 5598. Also, you may E-mail him at (rzeller@sha.state.md.us).

Sincerely,

A handwritten signature in blue ink that reads "Richard A. Zeller".  
for Steven D. Foster, Chief  
Access Management Division

SDF/raz

My telephone number/toll-free number is \_\_\_\_\_

Maryland Relay Service for Impaired Hearing or Speech 1.800.735.2258 Statewide Toll Free

Street Address: 707 North Calvert Street • Baltimore, Maryland 21202 • Phone 410.545.0300 • [www.roads.maryland.gov](http://www.roads.maryland.gov)

BALTIMORE COUNTY, MARYLAND  
INTEROFFICE CORRESPONDENCE

TO: Arnold Jablon, Director  
Department of Permits, Approvals  
And Inspections

DATE: July 19, 2012

FROM: *[Signature]* Dennis A. Kennedy, Supervisor  
Bureau of Development Plans  
Review

SUBJECT: Zoning Advisory Committee Meeting  
For July 30, 2012  
Item Nos. 2012-0286, 0298, 0327, 0328, 0329, 0330, 0331, 0332.  
Item Nos. 2013-0002, 0003, 0004.

The Bureau of Development Plans Review has reviewed the subject-zoning items, and we have no comments.

DAK: ~~CEN~~

cc: File

G:\DevPlanRev\ZAC -No Comments\ZAC-07302012-NO COMMENTS.doc



JB 9/7  
10 AM

Case No.: 2013-0002-A

Exhibit Sheet

Petitioner/Developer

Protestants

DW 12-12-12  
DW 11-7-12

|        |                                        |                                        |
|--------|----------------------------------------|----------------------------------------|
| No. 1  | Kellman CV                             | Photo of Fox family Garage             |
| No. 2  | Rolandue Plat                          | Color Photo - Side Yard                |
| No. 3  | Site Plan                              | Color Photo - Side Yard                |
| No. 4  | My Neighborhood Map                    | Deed                                   |
| No. 5  | 5A-J<br>Color Photos                   | Photo of Front Door @<br>923 Rolandue. |
| No. 6  | Topo Map County GIS                    | Photo of Common Driveway               |
| No. 7  | Aerial Showing Contour Lines           | Rolandue Plot                          |
| No. 8  | Drawings of Proposed Garage - 8A+8B    | 9-5-12 Letter - J. Wolf                |
| No. 9  | 9-6-12 letters from Butchok + Callaway | Color Photos 9A, 9B, 9C                |
| No. 10 |                                        |                                        |
| No. 11 |                                        |                                        |
| No. 12 |                                        |                                        |



**MITCHELL J. KELLMAN**  
**DIRECTOR OF ZONING SERVICES**

**Education**

Towson University, BA, Geography and Environmental Planning, Urban Planning  
Towson University, Masters, Geography and Environmental Planning, Urban Planning

**Professional Summary**

Mr. Kellman has over 24 years of experience working in zoning, subdivision, and development regulations for the public and private sector; 12 of those years were with the Baltimore County Office of Planning and Zoning. His responsibilities included review, approval and signatory powers on behalf of the Director of Final Development Plans and Record Plats. He represented the Zoning Office on the County Development Review Committee, a body reviewing the procedural compliance of all development submissions. Review of petitions and site plans filed for zoning hearing approvals were within his authority. Additionally, he supervised county review staff, met with professionals and the public on development project matters, and made determinations regarding developments and their compliance with county regulations. In working for DMW, he has extensive experience in testifying before the Baltimore County Zoning Commissioner, Hearing Officer, Administrative Law Judges, and Board of Appeals. He also regularly represents the company at the Baltimore County Development Review Committee meetings. He is also a member of Baltimore County's Design Review Panel which formulates design recommendations to the Planning staff and Administrative Law Judges.

**Partial List of Projects**

AT&T, Baltimore County Sites  
Delight Quarry, Baltimore County, MD  
Hunt Valley Business Community, Baltimore County, MD  
GBMC, Baltimore County, MD  
Goucher College, Baltimore County, MD  
Greenspring Quarry, Baltimore County, MD  
Loveton Business Center, Baltimore County, MD  
Oakcrest Village Retirement Community, Baltimore County, MD  
Sheppard and Enoch Pratt Hospital, Baltimore County, MD  
Sparks Corporate Center, Baltimore County, MD  
Sprint Nextel, Baltimore County Sites  
T-Mobile, Baltimore County Sites  
Towson Town Center, Baltimore County, MD  
Verizon Wireless, Baltimore County Sites

**Professional Experience**

Daft-McCune-Walker, Inc., Towson, MD: 2000-Present  
Baltimore County Office of Planning and Zoning, Permits and Development Management -  
Zoning Office, Development Control, 1988-2000  
Baltimore County Design Review Panel, 2012  
Greater Towson Committee, Planning and Development Sub-Committee, 2012





PLAT NO.2  
"ROLANDVUE"

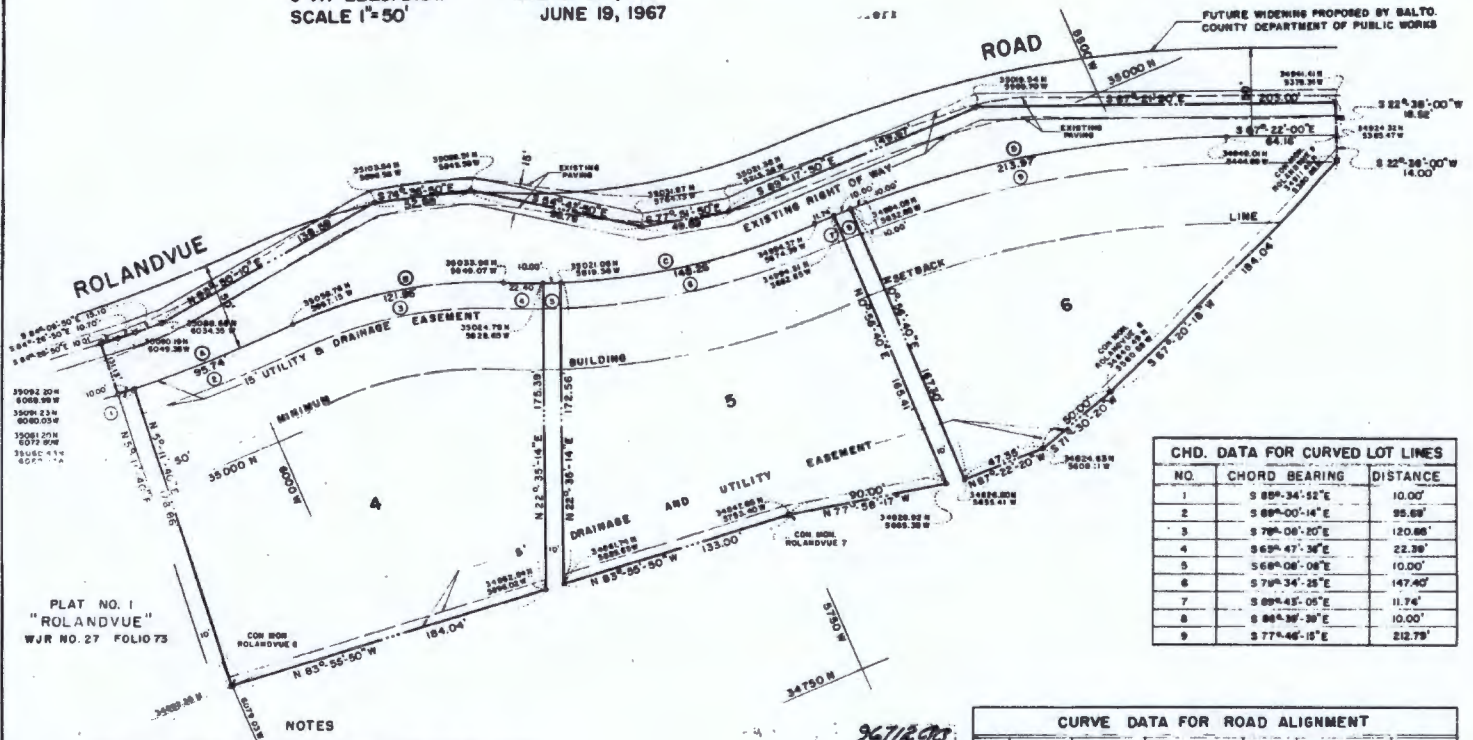
OWNED AND DEVELOPED  
BY  
HERBERT M. BRUNE, JR. &  
ELAINE M. BRUNE  
1225 MATHIESON BLDG.  
BALTO.-2, MD.

OTA 32 FOLD 89

THIS PHOTO TAKEN FROM THE  
RECORDS OF THE CIRCUIT  
COURT FOR BALTIMORE  
COUNTY IS FOR OFFICIAL  
USE ONLY AND NOT TO BE  
DUPLICATED FOR SALE OR  
GIFT.

9 TH ELEC. DIST.  
SCALE 1"=50'

BALTO. CO., MD  
JUNE 19, 1967



| NO. | CHORD BEARING  | DISTANCE |
|-----|----------------|----------|
| 1   | S 89°-34'-52"E | 10.00'   |
| 2   | S 89°-00'-14"E | 95.69'   |
| 3   | S 78°-04'-20"E | 120.88'  |
| 4   | S 69°-47'-38"E | 23.28'   |
| 5   | S 69°-08'-08"E | 10.00'   |
| 6   | S 78°-34'-25"E | 147.40'  |
| 7   | S 89°-43'-05"E | 11.74'   |
| 8   | S 86°-36'-38"E | 10.00'   |
| 9   | S 77°-46'-15"E | 212.79'  |

| NO. | RADIUS  | ARC(L)  | Δ           | TAN.    | LCB            | CHORD   |
|-----|---------|---------|-------------|---------|----------------|---------|
| A   | 685.00' |         |             |         |                |         |
| B   | 250.00' | 121.86' | 27°-55'-40" | 52.16'  | S 78°-04'-20"E | 120.88' |
| C   | 396.36' | 180.66' | 26°-06'-00" | 91.93'  | S 77°-13'-55"E | 179.11' |
| D   | 589.17' | 235.71' | 22°-55'-20" | 119.45' | S 78°-46'-40"E | 234.14' |

1) THE STREETS AND/OR ROADS AS SHOWN HEREON AND MENTION THEREOF IN DEEDS ARE FOR THE PURPOSE OF DESCRIPTION ONLY AND THE SAME ARE NOT INTENDED TO BE DEDICATED TO PUBLIC USE. THE FEE SIMPLE TITLE THEREOF IS EXPRESSLY RESERVED IN THE GRANTORS OF THE DEED TO WHICH THIS PLAT IS ATTACHED, THEIR HEIRS AND ASSIGNS.

2) THE BEARINGS AND COORDINATES SHOWN HEREON ARE REFERRED TO THE TRUE MERIDIAN AND COORDINATE SYSTEM OF THE BALTO. COUNTY METROPOLITAN DISTRICT AS ESTABLISHED IN THIS AREA BY MET.DIST.HUBS NOS. X-4361 AND X-4367 AS LOCATED AND VALUED FEBRUARY, 1960.

I HEREBY CERTIFY THAT THE REQUIREMENTS AS SET FORTH IN SECTIONS 72A, 72B, 72C, AND 72D OF ARTICLE 17 OF THE ANNOTATED CODE OF MARYLAND (1939 EDITION) TITLE "CLERKS OF COURTS" AS FAR AS IT CONCERNS THE MAKING OF THIS PLAT & SETTING OF THE MARKERS, HAVE BEEN COMPLIED WITH.

SIGNED: [Signature]  
REGISTERED LAND SURVEYOR NO. 1625

SIGNED: [Signature]  
REGISTERED LAND SURVEYOR NO. 1625

LEO W. RADER  
REGISTERED LAND SURVEYOR  
38 BELFAST ROAD  
BALTIMORE, MD. CL. 2-2820

APPROVED FOR BALTIMORE COUNTY HEALTH DEPARTMENT  
BY

[Signature] DATE 11/20/67  
DEPUTY STATE AND COUNTY HEALTH OFFICER

APPROVED FOR BALTIMORE COUNTY PLANNING BOARD  
BY

[Signature] DATE 11/21/67  
DIRECTOR

HIGHWAY DEPARTMENT OF BALTIMORE COUNTY- APPROVED  
FOR STREET ALIGNMENT AND LOCATION  
BY

[Signature] DATE 11/11/67  
ENGINEER

ALL-STATE LEGAL®  
PETITIONER'S  
EXHIBIT  
2



**Viol**





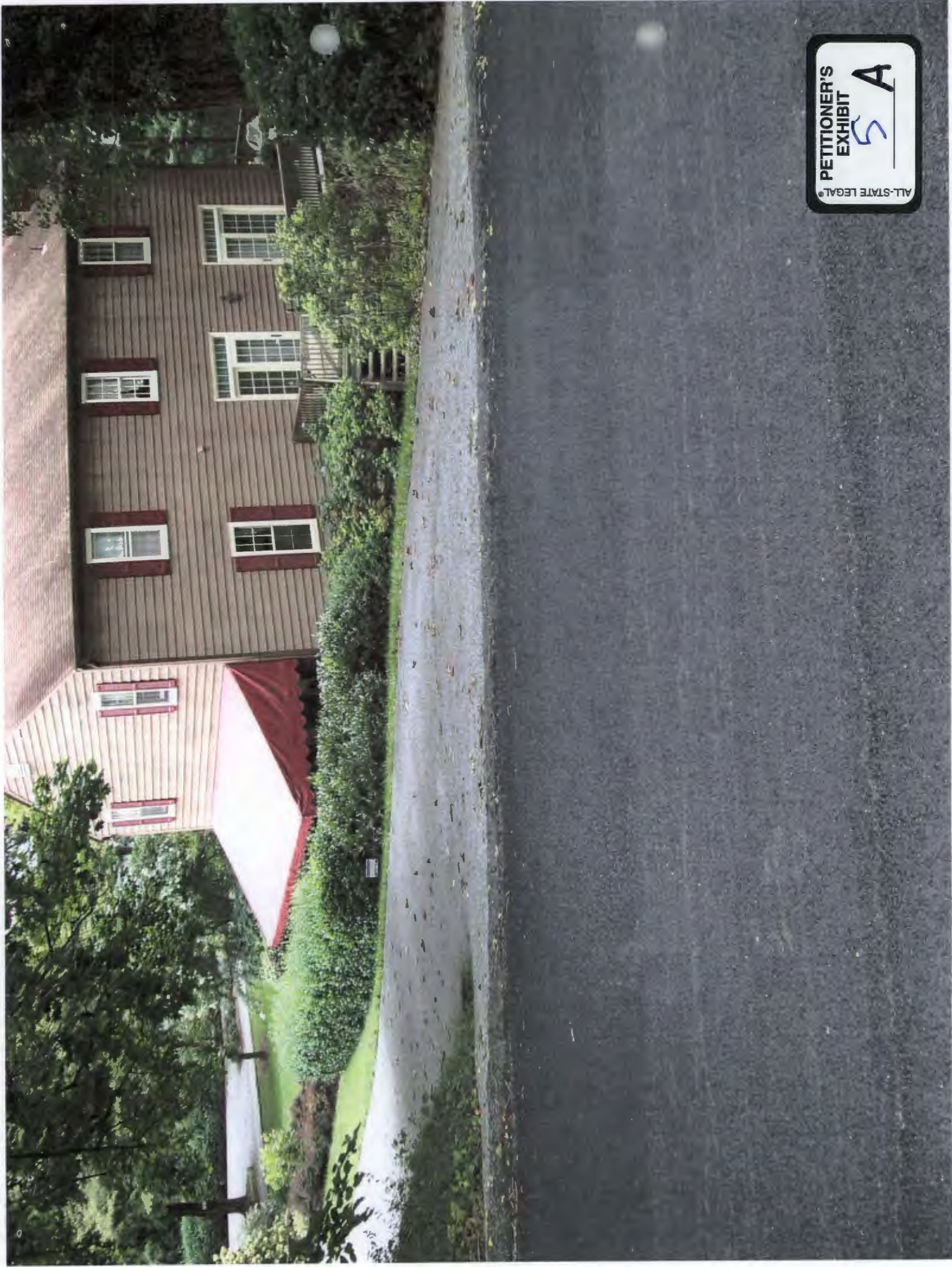
Environmental Map

Created By  
Baltimore County  
My Neighborhood



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ALL-STATE LEGAL®  
PETITIONER'S  
EXHIBIT  
5D









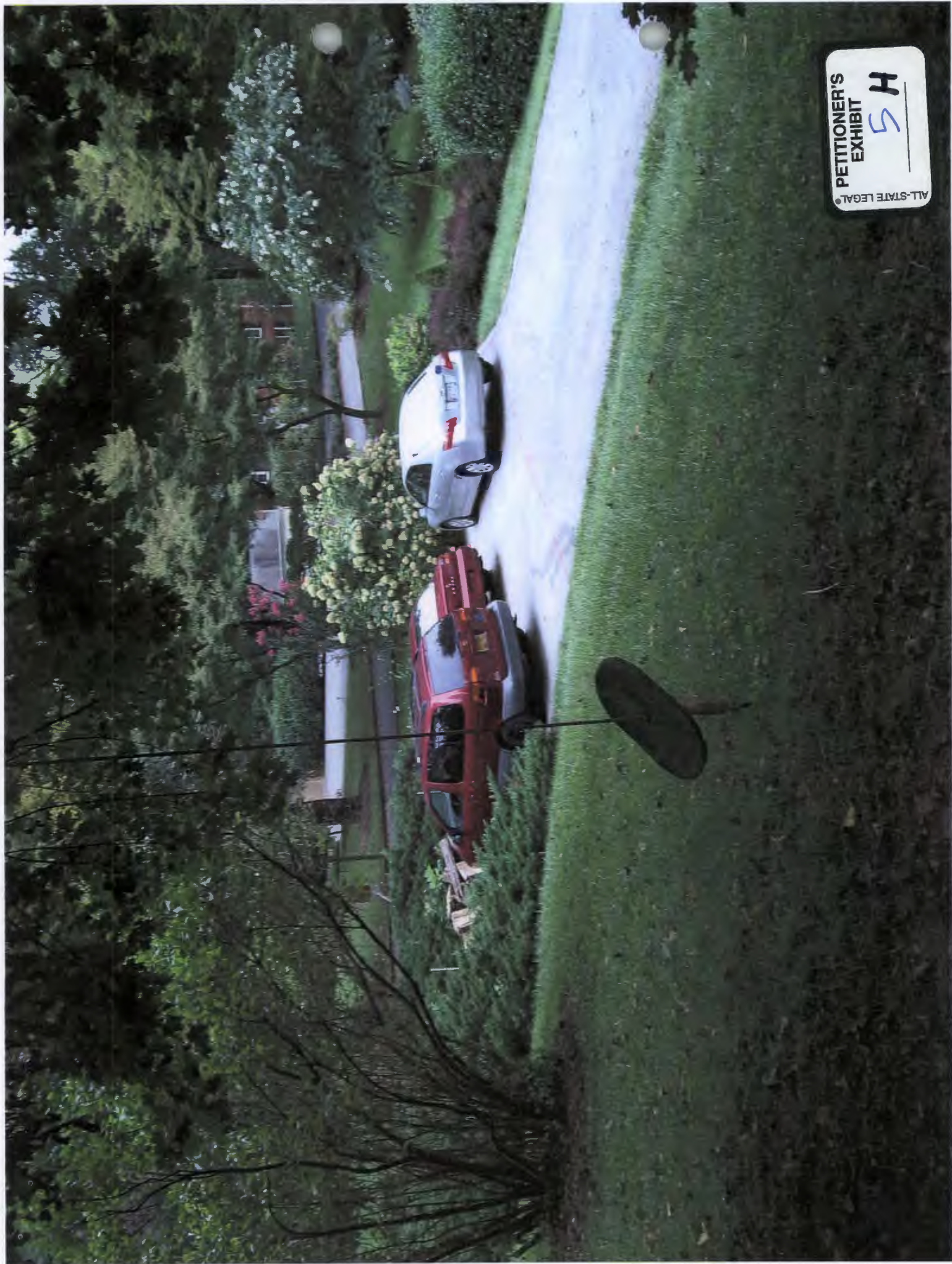
ALL-STATE LEGAL®  
PETITIONER'S  
EXHIBIT  
SF





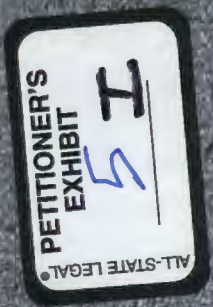


ALL-STATE LEGAL®  
PETITIONER'S  
EXHIBIT  
5 H





Detached Garage  
facing front of  
Petitioners' Home

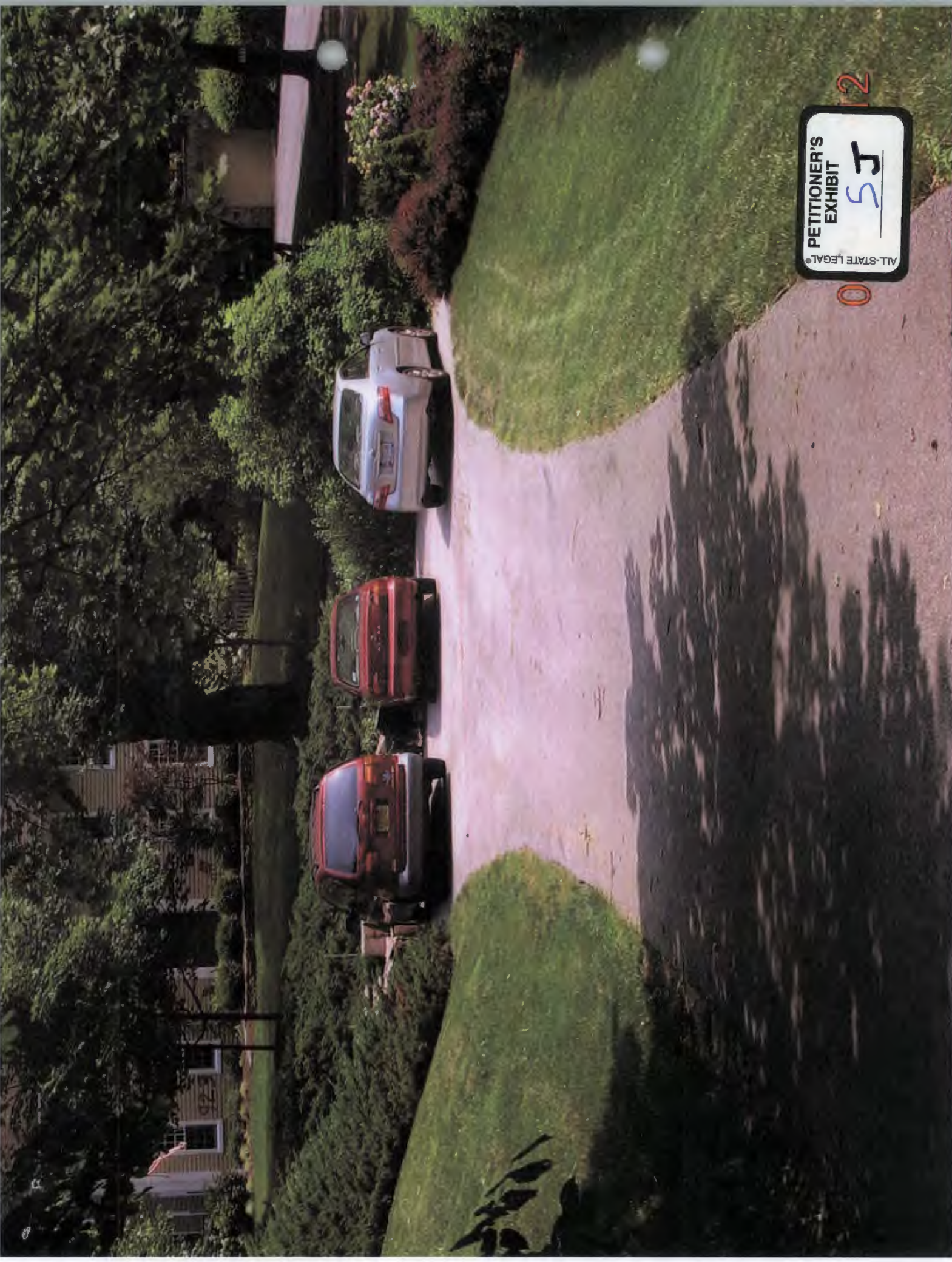




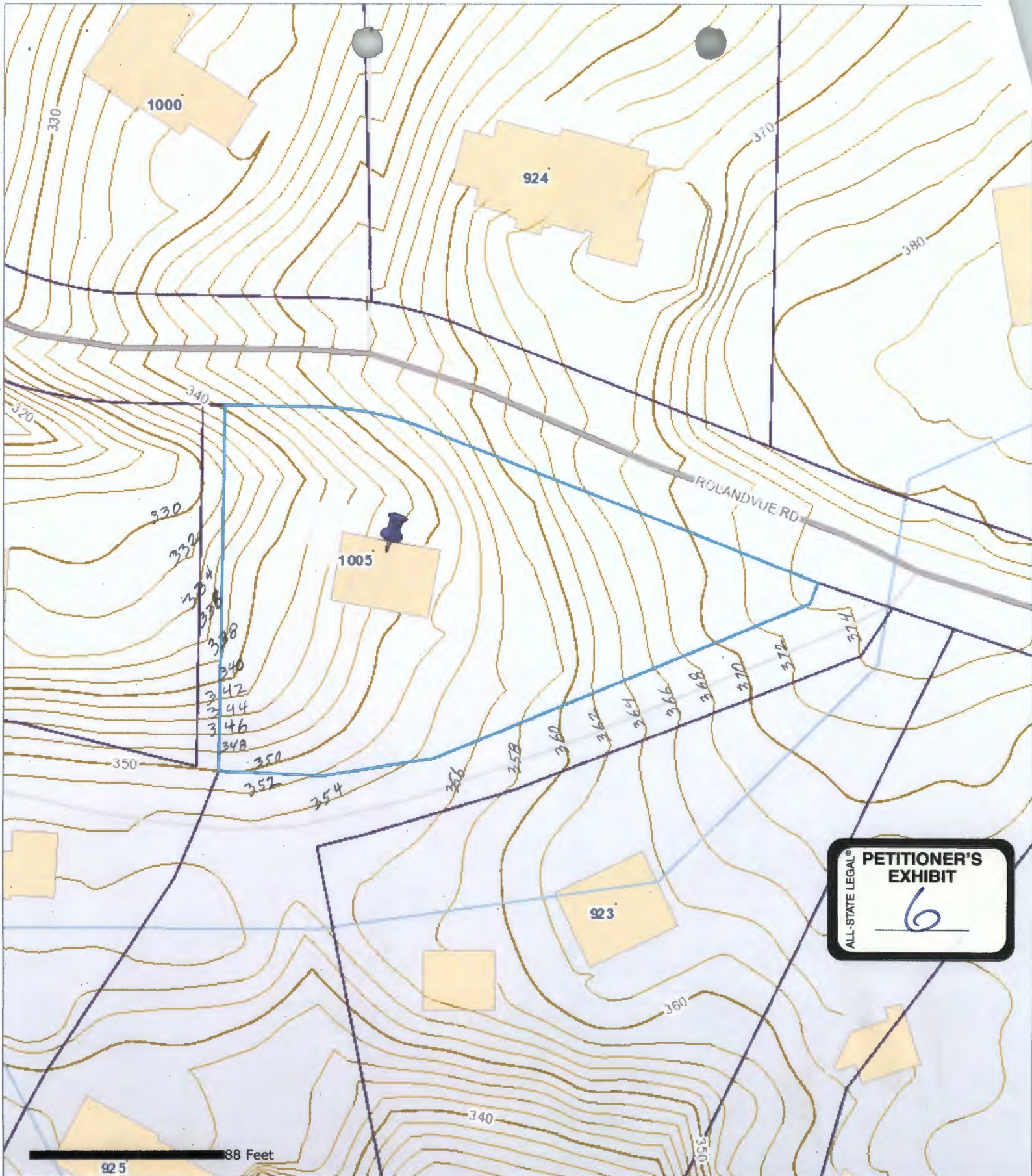
ALL-STATE LEGAL®  
PETITIONER'S  
EXHIBIT  
55

12

0







925

88 Feet

42' DROP OF ELEV.  
OVER 278.13' = 15.1% GRADE  
Environmental Map

Created By  
Baltimore County  
My Neighborhood



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Printed 6/7/2012





# Environmental Map

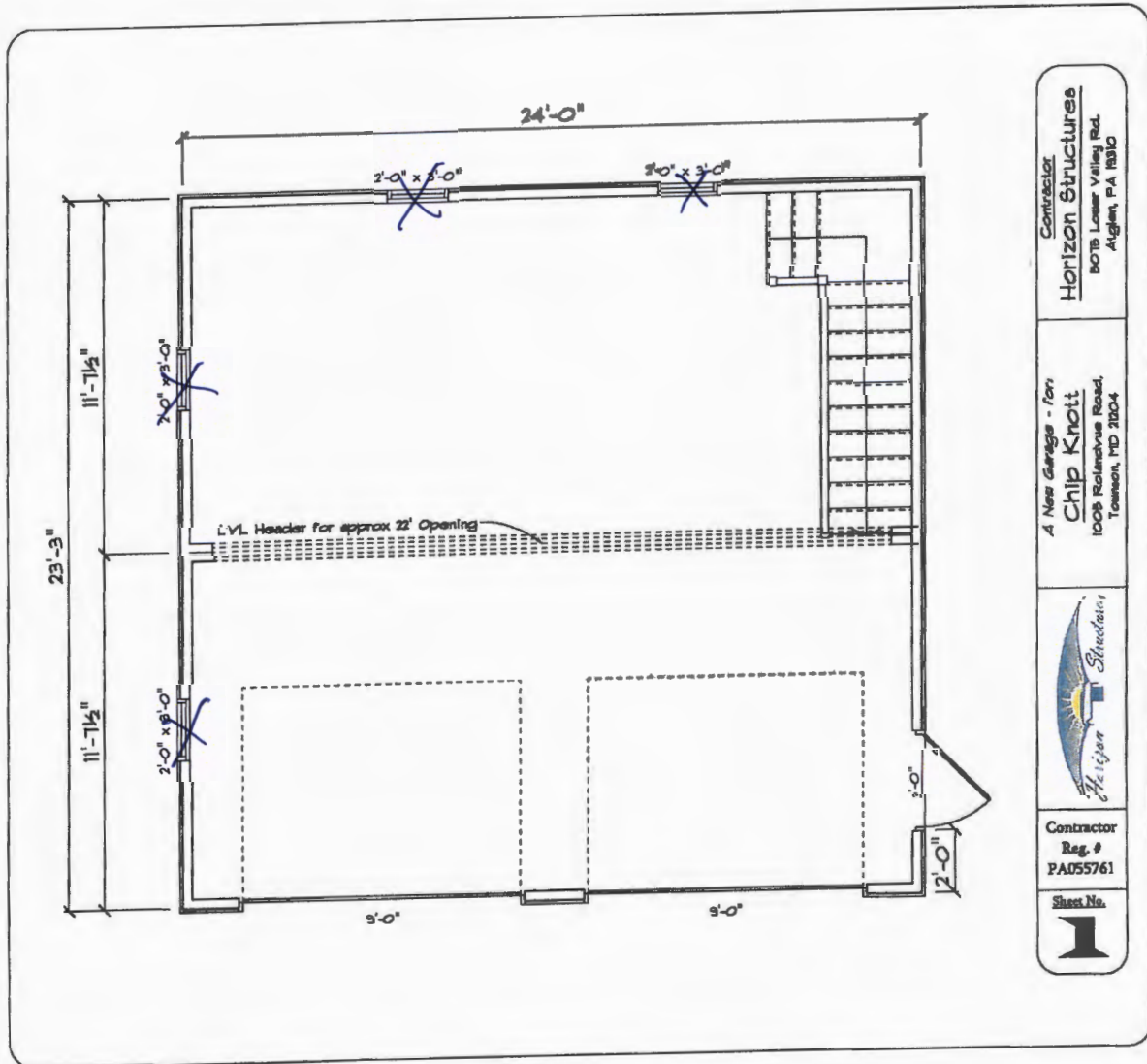
Created By  
Baltimore County  
My Neighborhood



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Printed 8/22/2012

ALL-STATE LEGAL®  
**PETITIONER'S  
EXHIBIT**  
**7**



Contractor  
**Horizon Structures**  
 8075 Lower Valley Rd.  
 Allentown, PA 18106

A New Garage - For  
**Chip Knott**  
 1008 Rollinsville Road,  
 Towson, MD 21204

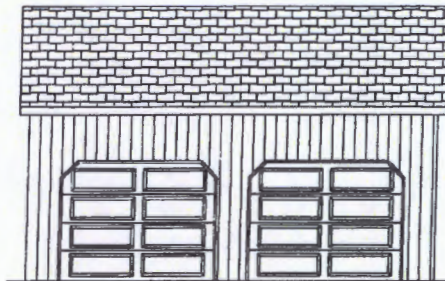


Contractor  
 Reg. #  
 PA055761

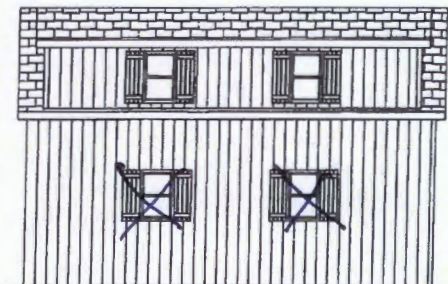
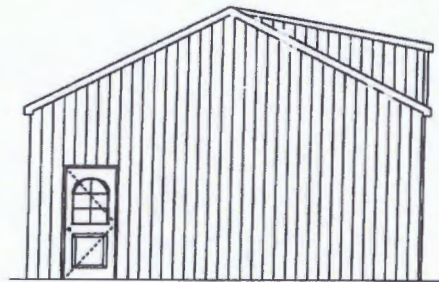
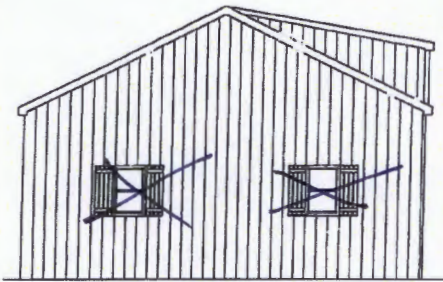
Sheet No.  
**1**







NOTE: Garage will not exceed the height provisions of the Baltimore County Zoning Regulations



X = REMOVED

Contractor  
**Horizon Structures**  
8075 Lower Valley Rd.  
Arlington, PA 15310

A New Garage - for  
**Chip Knott**  
1008 Rolandus Road,  
Towson, MD 21204



Contractor  
Reg. #  
PA055761

Sheet No.  
**2**



September 6, 2012

To the zoning Board of Baltimore  
County.

We, Karole + Richard Butchok, live at  
1000 Rolandview Road, across the street  
from Mr. + Mrs. Knott.

They have shown us their plans for building  
a garage at the end of their driveway, not to  
exceed sixteen (16) feet in length.

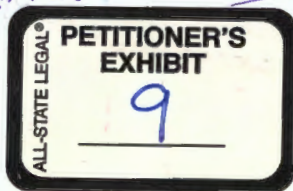
We have no objection to their plans.

Richard Butchok

RICHARD BUTCHOK

Karole Butchok

KAROLE BUTCHOK





September 5, 2012

We are neighbors that live at 924 Rolandvue Road, right across from Pam and Chip Knott. We do not object to their proposal of erecting a detached two car garage on the east side of their house. We felt it would be an attractive addition to their property.

Thomas L. Caldrony

Thomas L. Caldrony

Virginia K. Caldrony

Virginia K. Caldrony





1005 ROLANDVUE RD.

LOOKING TOWARD EXISTING PARKING PAD



↑  
SOUTH

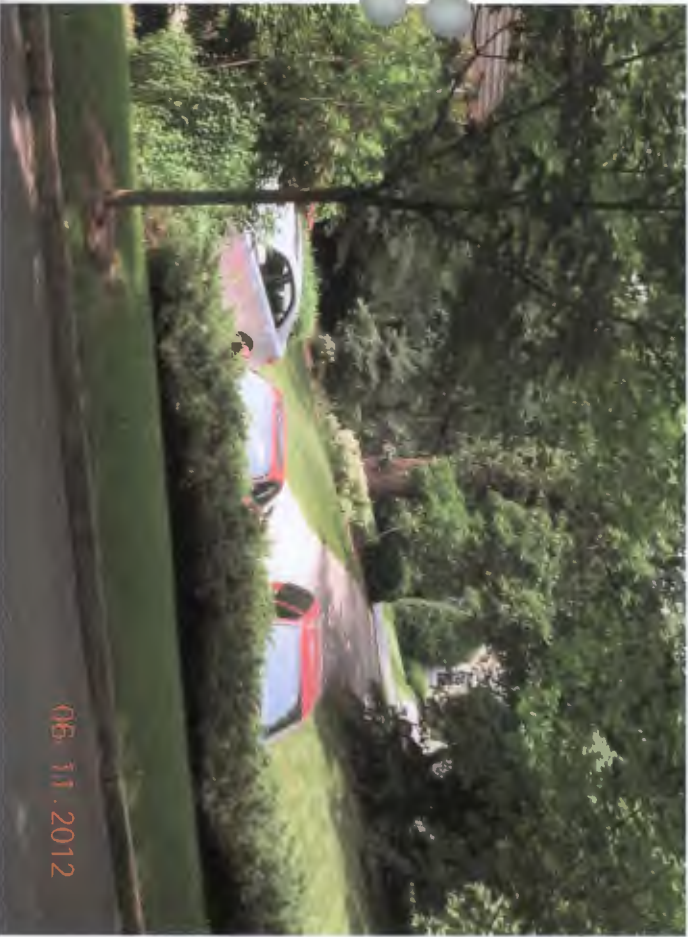
06.11.2012

LOOKING NORTH



06.11.2012

LOOKING NORTH



06.11.2012

LOOK FROM NEIGHBOR FRONT DOOR AREA  
(#923)

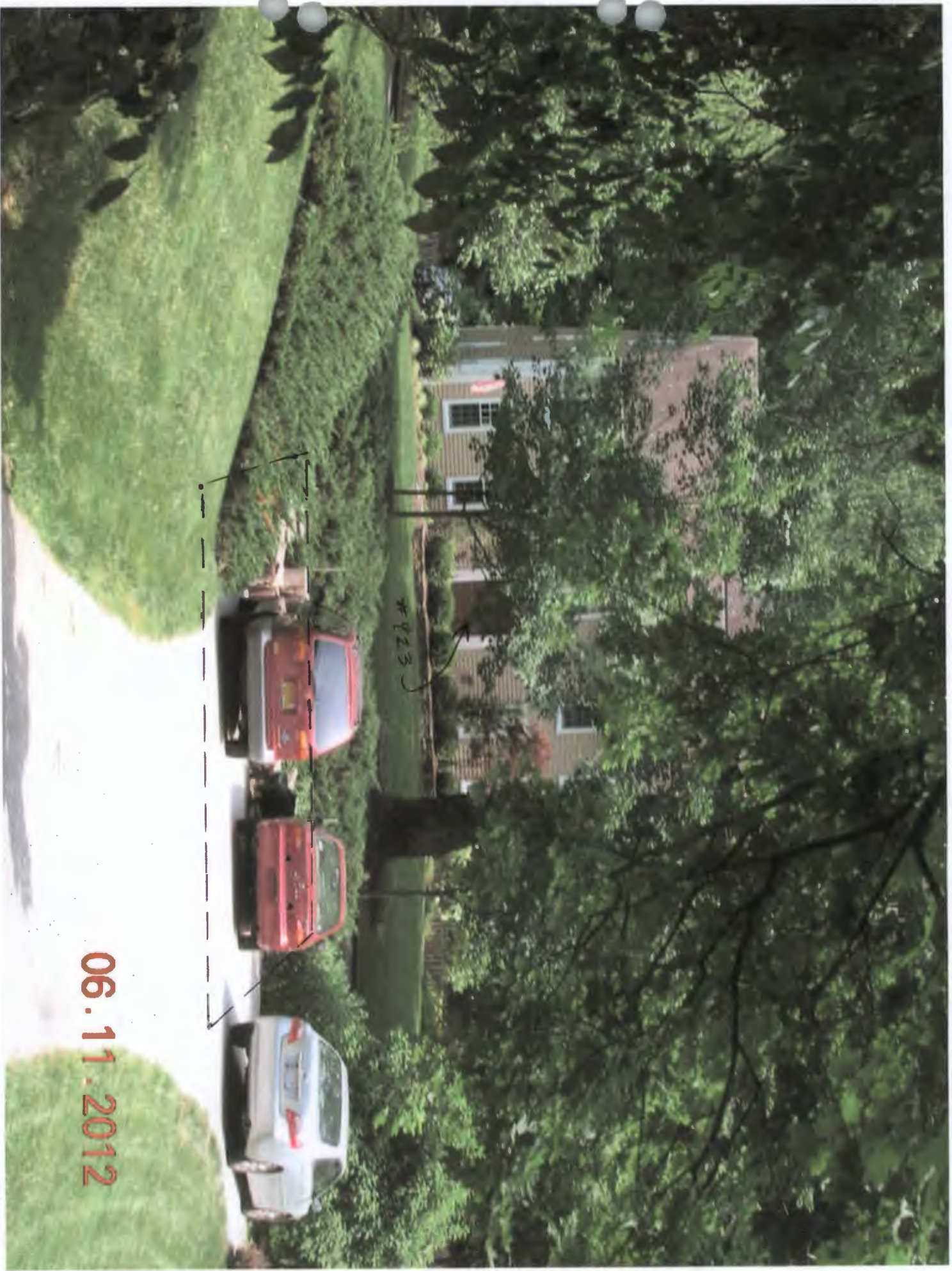


06.11.2012

ITW #~



1005 ROLANDVUE Rd.



06.11.2012

APPROX LOCATION PROPOSED GARAGE

Item # 0002



1005 ROLAND VUE Rd.

LOOKING FROM FRONT DOOR AREA



LOOKING WEST



LOOKING NORTH



LOOKING NORTH WEST



Item #0002



TOP OF 1005 ROLANDVUE



LOOKING UP TOWARD TOP OF 1005 ROLANDVUE (EAST)



1005 ROLANDVUE Rd.



LOOKING NORTH

LOOKING DOWN TOWARD BOTTOM OF PROPERTY (WEST)



Item #0002



CASE NAME Khatt  
CASE NUMBER 2013-0002-A  
DATE 9-7-12

[illegible]



CASE NAME Knott  
CASE NUMBER 2013-0002-A  
DATE 9-7-12

[illegible]



proposed  
garage



Item #0002



**VIOLATION CASE INFO:**



**VIOLATION CASE INFO:**



**VIOLATION CASE INFO:**

September 5, 2012

Re: Zoning Case No. 2013-0002A

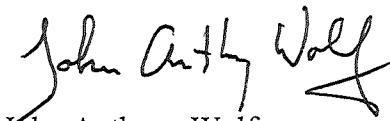
To Whom It May Concern:

The undersigned is the immediate next-door neighbor to 1005 Rolandvue Road. I am advised that the property owners, Henry A. and Pamela B. Knott, seek a zoning variance to erect a windowless structure in front of their house at a height in excess of current zoning.

Please note this as my objection to request for the subject zoning variance as both the proposed height and position of the structure on the property are not in keeping with the neighborhood.

Thank you.

Very truly yours,

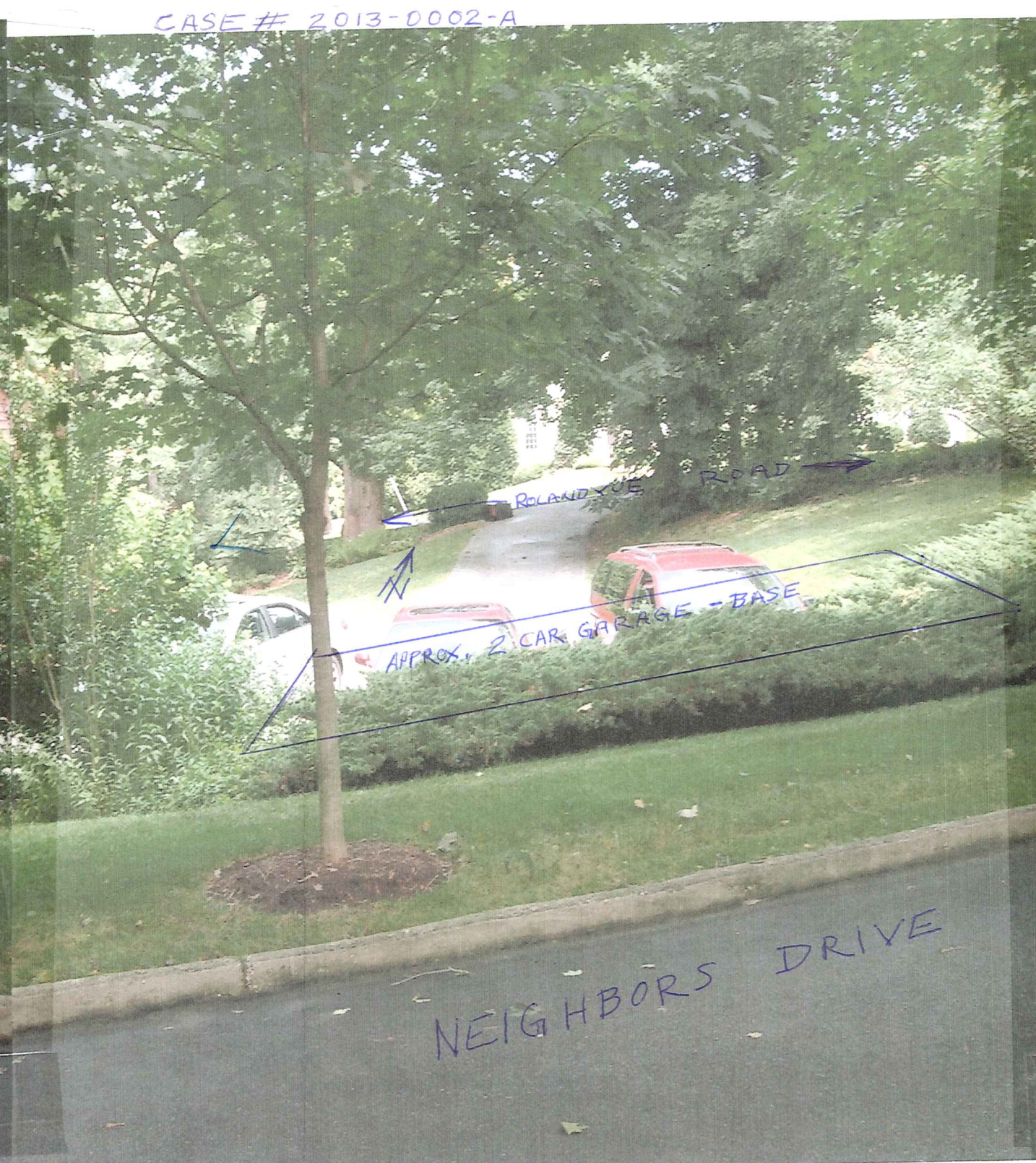


John Anthony Wolf  
1007 Rolandvue Road  
Ruxton, MD 21204

cc: Mr. and Mrs. Henry A. Knott

Prot. 8





Item #0002





924 Rolandvue Road Prot.  
9A





1001 Rolandvue Road <sup>Prot.</sup>  
9B





925 Rolandvue Road Prot.  
9C





PROTESTANT' S

EXHIBIT NO. 1

923 Rolandvue Road





PROTESTANT' S  
EXHIBIT NO. 2

Yard of 1005 which sits to the side of the house





PROTESTANT' S

EXHIBIT NO. 3



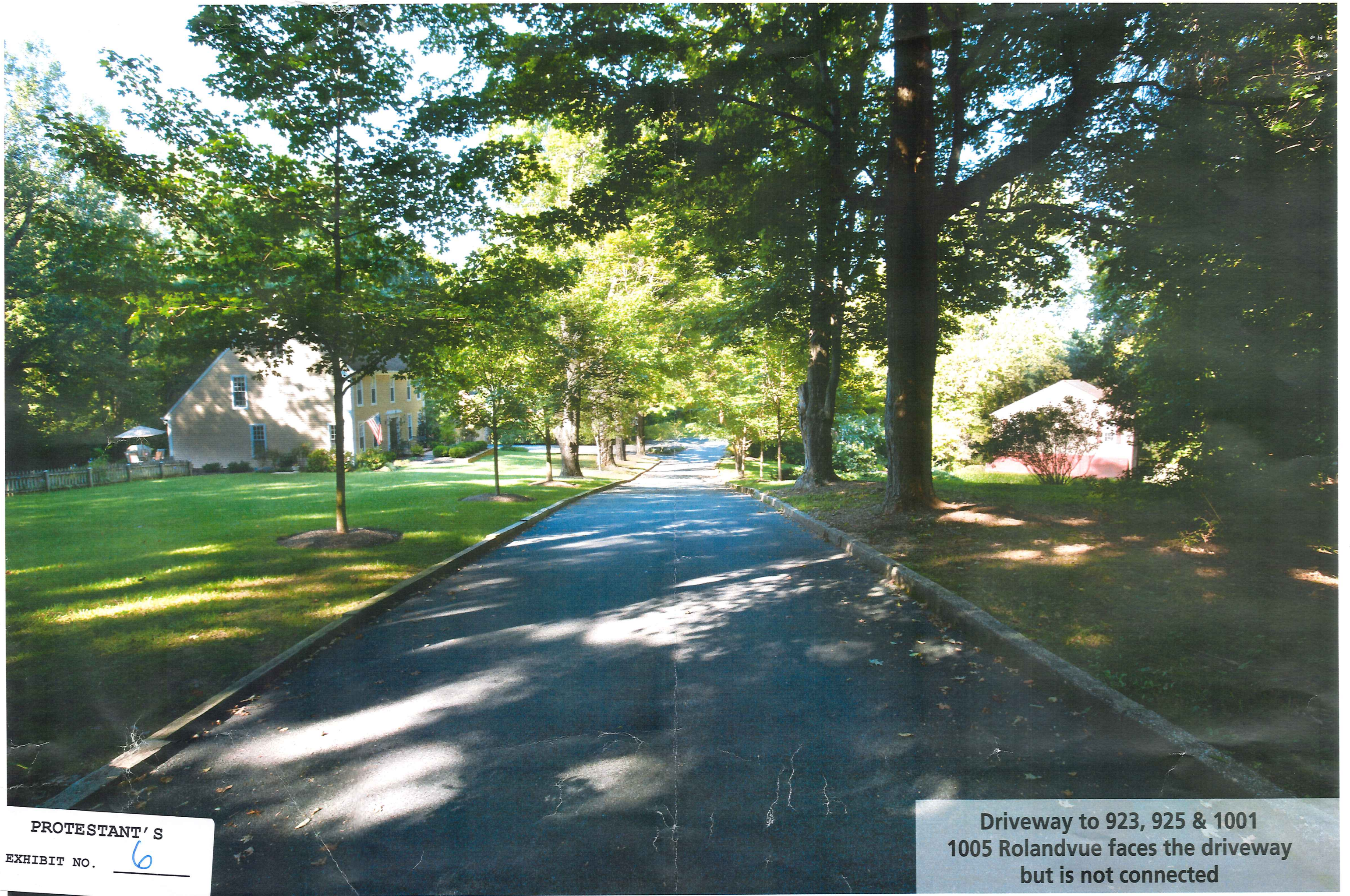


PROTESTANT' S

EXHIBIT NO. 5

View from front door of 923 Rolandvue  
to  
proposed garage at 1005 Rolandvue





PROTESTANT' S  
EXHIBIT NO. 6

Driveway to 923, 925 & 1001  
1005 Rolandvue faces the driveway  
but is not connected



